

UNITED STATES BANKRUPTCY COURT
EASTERN DISTRICT OF NEW YORK

In re: Long Beach Medical Center, et al.,
Case Nos. 14-70593 and 14-70597

UNITED STATES BANKRUPTCY COURT
EASTERN DISTRICT OF NEW YORK

GLOBAL NOTES

1. Description of the Case

On February 19, 2014 (the "Petition Date"), the Debtors filed voluntary petitions with the Bankruptcy Court under Chapter 11 under case numbers 14-70593 and 14-70597. Orders for relief were entered by the Bankruptcy Court on the Petition Date. The cases have been consolidated solely for the purpose of joint administration under Case No. 14-70593. The Debtors currently are managing their respective properties and businesses as debtors-in-possession pursuant to the Bankruptcy Code.

2. Basis of Presentation

The Schedules of Assets and Liabilities (the "Schedules") and the Statements of Financial Affairs (the "Statements", and collectively with the Schedules the "Schedules and Statements") of each of the Debtors have been prepared pursuant to 11 U.S.C. § 521 and Rule 1007 of the Federal Rules of Bankruptcy Procedure by management of the Debtors with the assistance of their court-appointed advisors. The Schedules and Statements are unaudited and the Debtors make no representation that any of the financial information contained in the Schedules and Statements have been prepared in accordance with GAAP.

Although management has made every reasonable effort to ensure that the Schedules and Statements are accurate and complete based on the information that was available to them at the time of preparation, subsequent information or discovery may result in material changes to these Schedules and Statements, and inadvertent errors or omissions may exist. Moreover, because the Schedules and Statements contain unaudited information that is subject to further review and potential adjustment, there can be no assurance that these Schedules and Statements are complete. The Debtors reserve all rights to amend and/or supplement their Schedules and Statements as is necessary and appropriate. Furthermore, nothing contained in the Schedules and Statements shall constitute a waiver of any rights or claims of the Debtors against any third party, or in or with respect to any aspect of these chapter 11 cases.

3. Summary of Significant Reporting Policies

The Schedules and Statements have been signed by Mr. Douglas Melzer. In reviewing and signing the Schedules and Statements, Mr. Melzer has necessarily relied upon the efforts, statements and representations of the Debtors' accounting and other financial personnel. Mr. Melzer has not (and could not have) personally verified the accuracy of each such statement and representation, including statements and representations

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concerning amounts owed to creditors. In addition, the following conventions were adopted by the Debtors in the preparation of the Schedules and Statements:

a. Debtors

Separate Schedules and Statements have been filed for each of the Debtors. Each Debtor's Schedules and Statements were prepared using the assets and liabilities of the respective Debtor pursuant to such Debtor's accounting records.

b. Reporting Date

The Debtors' Schedules and Statements were prepared with data as of the Petition Date. The Debtors closed their books immediately upon filing for Chapter 11 in order to have a "clean cut-off" and to begin a new reporting period. The Debtors made all attempts to complete a "hard close" prior to filing the Schedules and Statements, however due to the short time frame allotted several accounts may continue to be adjusted after the Schedules and Statements are filed.

c. Book Value

To the extent available, the appraised value of assets is noted; otherwise while current valuations were obtained with respect to certain major assets, it was too expensive and unduly burdensome to obtain current market valuations of the Debtors' property interests. The carrying value on the Debtors' books (net book value) of the Debtors' interests in property and of the Debtors' liabilities is reflected on the Debtors' Schedules and Statements.

d. Accounts Receivable and Payable

Each Debtor maintains its own records pertaining to its accounts receivable and payable.

e. Property and Equipment - Owned

Unless otherwise noted, owned property and equipment are stated at net book value. Amounts ultimately realized from any asset, or the actual value of any such asset to the extent it must be determined in connection with these chapter 11 cases, may vary from the values stated in the Schedules and Statements and such variance may be material. The Debtors' reserve the right to contend and/or prove that the value of any asset set forth in the Schedules may, in fact, be different from the value ascribed to that asset in the Schedules.

f. Property and Equipment - Leased

In the ordinary course of business, the Debtors lease equipment from certain third-party lessors for use in daily operations. The property subject to such leases is not reflected in the Schedules and Statements as either owned property or assets of the Debtors or property or assets of third parties within the control of the Debtors. Nothing in the Schedules and Statements is or shall be construed as an admission or determination as to the legal status of any lease (including whether

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any lease is a true lease or a financing arrangement), and the Debtors reserve all rights with respect to any such issues. Similarly, the Debtors may have in their possession certain equipment which is owned by third party customers but which remains in the Debtors' possession. To identify each item would be unduly burdensome. Accordingly, such property and equipment is not reflected in the Schedules and Statements as owned property or property of third parties within the control of the Debtors.

g. Payments to Creditors

The Debtors have scheduled payments to creditors made within the 90 days prior to the commencement of the Chapter 11 cases on the appropriate Statement of Financial Affairs 3(b) of the Debtor that holds the bank account from which the payment was made. The Debtors have not scheduled payments made to employees that were not officers or directors of a Debtor or one of its affiliates during the 90 days prior to the Petition Date to the extent such payments were ordinary course payments of wages or other compensation. These ordinary course payments represent thousands of transactions and are not listed in the Schedules and Statements.

h. Intellectual Property Rights

Inclusion of certain intellectual property rights on the Schedules and Statements shall not be construed as an admission that such intellectual property rights have not been abandoned, have not been terminated or otherwise expired by their terms, or have not been assigned or otherwise transferred pursuant to a sale, acquisition or other transaction. Accordingly, the Debtors reserve all of their rights with respect to the legal status of any such intellectual property rights.

i. Causes of Action

The Debtors have not set forth all causes of action against all third parties as assets in their Schedules and Statements. The Debtors reserve all of their rights with respect to any causes of action they may have and neither these Global Notes nor the Schedules and Statements shall be deemed a waiver of any such causes of action.

j. Schedule D

Except as otherwise agreed in accordance with a stipulation or agreed order or any other order entered by the Bankruptcy Court, the Debtors reserve their rights to dispute or challenge the validity, perfection or immunity from avoidance of any lien purported to be granted or perfected in any specific asset to a secured creditor listed on Schedule D. Holders of secured claims by virtue of holding setoff rights against the Debtors are not included on Schedule D. Lessors, utility companies and other parties which may hold security deposits have not been listed on Schedule D. The Debtors may not have scheduled all alleged mechanics' or material men's liens on Schedule D. The descriptions provided in Schedule D are

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intended only to be a summary of the information available to the Debtors. Finally, the balances reflected on Schedule D are, to the best of Debtors' knowledge as of the Petition Date, and accordingly have not been reduced for authorized postpetition payments.

k. Schedule F

In accordance with certain "first day" and final orders, the Debtors are authorized to pay the prepetition claims of various creditors in the ordinary course of business. Payments made after the Petition Date pursuant to the first day orders may not be accounted for in Schedule F for each of the Debtors. The Debtors also expressly incorporate by reference into this Schedule F all parties to pending and potential litigation listed in Exhibit 4(a) to the Debtors' Statements as contingent, unliquidated and disputed claims, to the extent not already listed on Schedule F. All parties to executory contracts, including those listed on Schedule G, are holders of contingent and unliquidated unsecured claims against the Debtors arising from (i) obligations under those executory contracts and/or (ii) rejection damages in the event any such executory contract is rejected. Not all such claims are listed on Schedule F.

l. Schedule G

The operations of the Debtors are complex. While reasonable best efforts have been made to ensure the accuracy of Schedule G, inadvertent errors or omissions may have occurred. The Debtors hereby reserve all their rights to dispute the validity, status or enforceability of any contracts, agreements or leases set forth in Schedule G and to amend or supplement such Schedule as necessary. Additionally, the placing of a contract or lease onto this Schedule shall not be deemed an admission that such contract is an executory contract or unexpired lease, or that it is necessarily a binding, valid and enforceable contract. The contracts, agreements and leases listed on Schedule G may have expired or may have been modified, amended and supplemented from time to time by various amendments, change orders, restatements, waivers, estoppel certificates, letters and other documents, instruments, and agreements which may not be listed therein. Certain of the real property leases listed on Schedule G may contain renewal options, guarantees of payment, options to purchase, rights of first refusal, rights to lease additional space and other miscellaneous rights. Such rights, powers, duties and obligations are not set forth on Schedule G. Certain of the executory agreements may not have been memorialized and could be subject to dispute. All executory agreements that are oral in nature have not been scheduled. The Debtors may be parties to various other agreements concerning real property, such as easements, rights of way, subordination, non-disturbance, supplemental agreements, amendments/letter agreements, title documents, consents, site plans, maps and other miscellaneous agreements. Such documents are not set forth on Schedule G.

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4. Claims

The Debtors' Schedules identify creditors and set forth the Debtors' estimate of the claims of creditors as of the Petition Date. Such Schedules capture claims the Debtors were aware of as of the Petition Date but may not have captured all claims. Claim amounts will be amended as appropriate for any such items subsequently identified. In addition, payments have subsequently been made to certain claimants in accordance with Bankruptcy Court orders in the Debtors' cases. Accordingly, the actual unpaid claims of creditors will differ from the amounts set forth in the Schedules and Statements.

5. Employee Claims

The Bankruptcy Court entered "first day" and final orders granting authority to the Debtors to pay certain prepetition and postpetition employee wages, salaries, benefits and other obligations. Pursuant to such authority, the Debtors made postpetition payments to employees on account of prepetition obligations. Accordingly, the Debtors believe that almost all employee claims for prepetition amounts for which the Debtors have received authorization to make payment either have been satisfied or are in the process of being satisfied.

6. Disputed, Contingent and/or Unliquidated Claims

Schedules D, E and F permit the Debtors to designate a claim as disputed, contingent and/or unliquidated. A failure to designate a claim on any of these Schedules as disputed, contingent and/or unliquidated does not constitute an admission that such claim is not subject to objection. The Debtors reserve the right to dispute, or assert offsets or defenses to any claim reflected on these Schedules as to nature, amount, liability or status, or to otherwise subsequently designate any claim as disputed, contingent, or unliquidated.

7. Accuracy

While the Debtors have sought to file complete and accurate Schedules and Statements, inadvertent errors and omissions may exist. Accordingly, the Debtors reserve the right to amend, modify, supplement, correct, change or alter any part of their Schedules and Statements as necessary or appropriate..

8. Global Notes Control

In the event that the Schedules and Statements differ from the foregoing Global Notes, the Global Notes shall control.

*** END OF GLOBAL NOTES ***

*** SCHEDULES AND STATEMENTS BEGIN ON THE FOLLOWING PAGE***

United States Bankruptcy Court
Eastern District of New York

In re Long Beach Medical Center

Debtor

Case No. 14-70593Chapter 11

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

| NAME OF SCHEDULE | ATTACHED (YES/NO) | NO. OF SHEETS | ASSETS | LIABILITIES | OTHER |
|--|----------------------|------------------|---------------|---------------|-------|
| A - Real Property | Yes | 2 | 13,303,300.00 | | |
| B - Personal Property | Yes | 6 | 4,097,306.97 | | |
| C - Property Claimed as Exempt | No | 0 | | | |
| D - Creditors Holding Secured Claims | Yes | 11 | | 25,192,338.14 | |
| E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E) | Yes | 92 | | 2,838,448.88 | |
| F - Creditors Holding Unsecured Nonpriority Claims | Yes | 99 | | 56,481,511.69 | |
| G - Executory Contracts and Unexpired Leases | Yes | 8 | | | |
| H - Codebtors | Yes | 1 | | | |
| I - Current Income of Individual Debtor(s) | No | 0 | | | N/A |
| J - Current Expenditures of Individual Debtor(s) | No | 0 | | | N/A |
| Total Number of Sheets of ALL Schedules | | 219 | | | |
| Total Assets | | | 17,400,606.97 | | |
| Total Liabilities | | | | 84,512,298.71 | |

In re **Long Beach Medical Center**Case No. **14-70593**

Debtor

SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim." If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

| Description and Location of Property | Nature of Debtor's Interest in Property | Husband, Wife, Joint, or Community | Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption | Amount of Secured Claim |
|--|---|------------------------------------|--|-------------------------|
| 455 East Bay Drive Long Beach, New York 11561 | Fee simple | - | 6,000,000.00 | 24,803,035.21 |
| 760 Lincoln Boulevard Long Beach, New York 11561 | Fee simple | - | 263,200.00 | 0.00 |
| 762 Lincoln Boulevard Long Beach, New York 11561 | Fee simple | - | 264,800.00 | 0.00 |
| 479 East State Street Long Beach, New York 11561 | Fee simple | - | 430,800.00 | 0.00 |
| 425 East State Street Long Beach, New York 11561 | Fee simple | - | 380,400.00 | 177,007.24 |
| 415 East State Street Long Beach, New York 11561 | Fee simple | - | 371,200.00 | 87,736.65 |
| 758 Lincoln Boulevard Long Beach, New York 11561 | Fee simple | - | 221,900.00 | 0.00 |
| 765 Franklin Boulevard Long Beach, New York 11561 | Fee simple | - | 201,800.00 | 37,144.04 |
| 761 Franklin Boulevard Long Beach, New York 11561 | Fee simple | - | 261,200.00 | 2,779.29 |
| 711 Lincoln Boulevard Long Beach, New York 11561 | Fee simple | - | 119,800.00 | Unknown |
| 757 Lincoln Boulevard Long Beach, NY 11561 | Fee Simple | - | 300,500.00 | 5,217.30 |
| 430 East Bay Drive Long Beach, NY 11561 | Fee Simple | - | Unknown | 22,873.00 |
| Sub-Total > | | | 8,815,600.00 | (Total of this page) |

In re Long Beach Medical CenterCase No. 14-70593

Debtor

SCHEDULE A - REAL PROPERTY
(Continuation Sheet)

| Description and Location of Property | Nature of Debtor's Interest in Property | Husband, Wife Joint, or Community | Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption | Amount of Secured Claim |
|---|---|-----------------------------------|--|-------------------------|
| 426 E. Bay Drive Long Beach, NY 11561 | Fee Simple | - | Unknown | Unknown |
| 420 E. Bay Drive Long Beach, NY 11561 | Fee Simple | - | Unknown | Unknown |
| 400 E. Bay Drive Long Beach, NY 11561 | Fee Simple | - | 1,487,700.00 | Unknown |
| 416 E. Bay Drive Long Beach, NY 11561 | Fee Simple | - | Unknown | 43,999.81 |
| Parking Lot 375 East Bay Drive Long Beach, NY 11561 | Fee simple | - | 3,000,000.00 | Unknown |
| Section 59, Blcok 276, Block 3 | Fee simple | - | Unknown | Unknown |
| Section 59, Block 147, Lot 36 | Fee simple | - | Unknown | Unknown |
| Section 59, Block 77, Lots 12-22, 29-39 | Fee simple | - | Unknown | Unknown |

Sub-Total > **4,487,700.00** (Total of this page)Total > **13,303,300.00**

(Report also on Summary of Schedules)

Sheet 1 of 1 continuation sheets attached to the Schedule of Real Property

In re **Long Beach Medical Center**Case No. **14-70593**

Debtor

SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

| Type of Property | N O N E | Description and Location of Property | Husband, Wife, Joint, or Community | Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption |
|--|------------------|---|---|---|
| 1. Cash on hand | | 455 East Bay Drive Long Beach, New York 11561 | - | 0.00 |
| 2. Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives. | | TD Bank 550 Long Beach Road Long Beach, New York 11561 Account No. 7017 - General Account | - | 608,493.79 |
| | | TD Bank 550 Long Beach Road Long Beach, New York 11561 Account No. 7025 - Payroll Account | - | 34,270.04 |
| | | TD Bank 550 Long Beach Road Long Beach, New York 11561 Account No. 7009 - Special Purpose Fund | - | 39,385.60 |
| | | TD Bank 550 Long Beach Road Long Beach, New York 11561 Account No. 2101 - FEMA Account | - | 1,211,677.54 |
| | | Capital One Bank 11 E Park Avenue Long Beach, New York 11561 Account No. 4662 - Self Insurance Fund MM Account | - | 1,486.00 |
| 3. Security deposits with public utilities, telephone companies, landlords, and others. | X | | | |
| 4. Household goods and furnishings, including audio, video, and computer equipment. | X | | | |
| 5. Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles. | X | | | |

Sub-Total > **1,895,312.97**
(Total of this page)

In re **Long Beach Medical Center**Case No. **14-70593**

Debtor

SCHEDULE B - PERSONAL PROPERTY
(Continuation Sheet)

| Type of Property | N O N E | Description and Location of Property | Husband, Wife, Joint, or Community | Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption |
|---|------------------|---|---|---|
| 6. Wearing apparel. | X | | | |
| 7. Furs and jewelry. | X | | | |
| 8. Firearms and sports, photographic, and other hobby equipment. | X | | | |
| 9. Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each. | | Progressive Casualty Ins. Co Automobile Insurance | - | Unknown |
| | | Physicians Reciprocal Commercial General Liability | - | Unknown |
| | | Federal Insurance Company Crime Insurance | - | Unknown |
| | | One Beacon Insurance Co D&O Liability | - | Unknown |
| | | Federal Insurance Company Environmental Liability Policy | - | Unknown |
| | | Lexington Insurance Co Excess Liability | - | Unknown |
| | | Federal Insurance Company Fiduciary Liability | - | Unknown |
| | | Physicians Reciprocal Professional Liability - Dr. Fishman | - | Unknown |
| | | Medical Liability Mutual Insurance Company Professional Liability - Dr. Statfeld | - | Unknown |
| | | Physicians Reciprocal Professional Liability - Primary | - | Unknown |
| | | Affiliated FM Property | - | Unknown |
| | | Fidelity National Property Property Flood | - | Unknown |
| | | The Standard Property Flood | - | Unknown |
| | | Wright National Flood Ins. Co. Property Flood | - | Unknown |

Sub-Total > **0.00**
(Total of this page)

Sheet **1** of **5** continuation sheets attached
to the Schedule of Personal Property

In re **Long Beach Medical Center**Case No. **14-70593**

Debtor

SCHEDULE B - PERSONAL PROPERTY
(Continuation Sheet)

| Type of Property | N O N E | Description and Location of Property | Husband, Wife, Joint, or Community | Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption |
|---|------------------|--|---|---|
| | | J&H Marsh Travel Accident | - | Unknown |
| | | State Insurance Fund Workers Compensation | - | Unknown |
| 10. Annuities. Itemize and name each issuer. | X | | | |
| 11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).) | X | | | |
| 12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars. | X | | | |
| 13. Stock and interests in incorporated and unincorporated businesses. Itemize. | X | | | |
| 14. Interests in partnerships or joint ventures. Itemize. | X | | | |
| 15. Government and corporate bonds and other negotiable and nonnegotiable instruments. | X | | | |
| 16. Accounts receivable. | | 455 East Bay Drive Long Beach, New York 11561 | - | 100,000.00 |
| 17. Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars. | X | | | |
| 18. Other liquidated debts owed to debtor including tax refunds. Give particulars. | X | | | |
| 19. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property. | X | | | |

Sub-Total > **100,000.00**
(Total of this page)

Sheet **2** of **5** continuation sheets attached
to the Schedule of Personal Property

In re Long Beach Medical CenterCase No. 14-70593

Debtor

SCHEDULE B - PERSONAL PROPERTY
(Continuation Sheet)

| Type of Property | N O N E | Description and Location of Property | Husband, Wife, Joint, or Community | Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption |
|--|------------------|---|---|---|
| 20. Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust. | X | | | |
| 21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each. | X | | | |
| 22. Patents, copyrights, and other intellectual property. Give particulars. | X | | | |
| 23. Licenses, franchises, and other general intangibles. Give particulars. | | Operating Certificate to operate Clinic Treatment Program located at 950 Church Street, Baldwin, New York 11510 Certificate No. 6618100A | - | Unknown |
| | | Operating Certificate for Long Beach Medical Center 455 East Bay Drive Long Beach, New York 11561 Certificate No. 2902000H | - | Unknown |
| | | NYS DOH Office of Health Systems Management Certificate No. 2902000H | - | Unknown |
| | | Long Beach Medical Center - Medical/Surgical CMS Provider No. 330225 | - | Unknown |
| | | Long Beach Medical Center The Joint Commission HCO: 3935 | - | Unknown |
| | | Long Beach Medical Center - Acute Rehab CMS Provider No. 33T225 | - | Unknown |
| | | Long Beach Medical Center - Inpatient Psychiatry CMS Provider No. 33S225 | - | Unknown |
| | | Inpatient Psychiatric Provider No. 33S225 and 6618020 | - | Unknown |
| | | Chemical Dependency Licenses 140711610 and HCO: 463582 | - | Unknown |

Sub-Total > 0.00
(Total of this page)

Sheet 3 of 5 continuation sheets attached
to the Schedule of Personal Property

In re Long Beach Medical CenterCase No. 14-70593

Debtor

SCHEDULE B - PERSONAL PROPERTY
(Continuation Sheet)

| Type of Property | N O N E | Description and Location of Property | Husband, Wife, Joint, or Community | Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption |
|--|------------------|--|---|---|
| | | Chemical Dependency Licenses HCO: 463582 and 140711610 | - | Unknown |
| | | Chronic Renal Dialysis CCN: 33-2413 | - | Unknown |
| | | Laboratory Licenses: LAP No.:1251201 AU-ID:1177946; Serial: LAP 63311 PFI:2107; CLIA: 33DO154201; Serial: PS34773 PFI: 2107; CLIA: 33DO154201 and Serial; PS 34772 PFI:2107; CLIA: 33D154201 | - | Unknown |
| | | Pharmacy License No. AL0782640 | - | Unknown |
| | | Radiology Registration No. 29004318 | - | Unknown |
| | | Nuclear Medicine No. 1159 DH No.: 11-789 | - | Unknown |
| | | Diagnostic Radiology Facility ID: 151951 and Map ID#01590-02 | - | Unknown |
| | | Tissue Bank-OR, Certificate No. LP203TF007 | - | Unknown |
| | | Family Alcohol & Chemical Dependence Treatment Services, Certificate No. 121110850 | - | Unknown |
| | | Methadone Maintenance Clinic Certificate No. 150310440 and HCO: 358697 | - | Unknown |
| | | Outpatient Counseling Center, Certificate No. 6618100A | - | Unknown |
| 24. Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes. | X | | | |
| 25. Automobiles, trucks, trailers, and other vehicles and accessories. | | Automobile: 2000 Ford Pickup, Model F350* *Valuation of vehicle is Fair Market Value. | - | 2,666.00 |
| | | Automobile: 2006 Ford Truck, Model E450* (lease) *Valuation of vehicle is Fair Market Value | - | 40,000.00 |
| | | Automobile: 2010 Infiniti, Model QX56* (lease) *Valuation of vehicle is Fair Market Value | - | 33,158.00 |
| Sub-Total > (Total of this page) | | | | 75,824.00 |

Sheet 4 of 5 continuation sheets attached
to the Schedule of Personal Property

In re Long Beach Medical CenterCase No. 14-70593

Debtor

SCHEDULE B - PERSONAL PROPERTY
(Continuation Sheet)

| Type of Property | N O N E | Description and Location of Property | Husband, Wife, Joint, or Community | Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption |
|--|------------------|--|---|---|
| | | Automobile: 2010 Ford, Model E450* *Valuation of vehicle is Fair Market Value | - | 40,000.00 |
| | | Automobile: 2011 Ford Edge* (lease) *Valuation of vehicle is Fair Market Value | - | 15,957.00 |
| | | Automobile: 2011 Ford Explorer* *Valuation of vehicle is Fair Market Value | - | 20,000.00 |
| | | Automobile: 2010 Starcraft Allstar Van* *Valuation of vehicle is Fair Market Value. | - | 44,000.00 |
| | | Automobile: Chrysler Town & Country* *Valuation of vehicle is Fair Market Value | - | 6,213.00 |
| 26. Boats, motors, and accessories. | X | | | |
| 27. Aircraft and accessories. | X | | | |
| 28. Office equipment, furnishings, and supplies. | X | | | |
| 29. Machinery, fixtures, equipment, and supplies used in business. | | Fixed Equipment, Machinery | - | 1,900,000.00 |
| 30. Inventory. | X | | | |
| 31. Animals. | X | | | |
| 32. Crops - growing or harvested. Give particulars. | X | | | |
| 33. Farming equipment and implements. | X | | | |
| 34. Farm supplies, chemicals, and feed. | X | | | |
| 35. Other personal property of any kind not already listed. Itemize. | X | | | |

Sub-Total > **2,026,170.00**
(Total of this page)
Total > **4,097,306.97**

(Report also on Summary of Schedules)

Sheet 5 of 5 continuation sheets attached
to the Schedule of Personal Property

In re **Long Beach Medical Center**Case No. **14-70593**

Debtor

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

| CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | C O D E B T O R | H U S B A N D W I F E J O I N T C O M M U N I T Y | DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL | UNSECURED PORTION, IF ANY |
|---|--------------------------------------|---|--|--|--|--------------------------------------|--|---------------------------------|
| | | | | | | | | |
| Account No. | | | Mechanic's Lien | | | | | |
| A Plus Masonry 909 Horesblock Road Farmingville, NY 11738 | | - | 455 East Bay Drive Long Beach, New York 11561 | | X | X | | |
| Value \$ | | | 6,000,000.00 | | | | 12,025.04 | Unknown |
| Account No. | | | Mechanic's Lien | | | | | |
| A1 Reliable Industries 141 Central Avenue Suite C Farmingdale, NY 11735 | | - | 425 East State Street Long Beach, New York 11561 | | X | X | | |
| Value \$ | | | 380,400.00 | | | | 12,075.00 | Unknown |
| Account No. | | | Stock and inventory of merchandise | | | | | |
| Amerisource Bergen Drug c/o Bruce W. Bieber Zimmet Bieber, LLP 437 Madison Ave, 40th Fl New York, NY 10022 | | - | | | X | X | | |
| Value \$ | | | 0.00 | | | | Unknown | Unknown |
| Account No. | | | Mechanic's Lien | | | | | |
| Andy Lopes Building Corp 3 South Stone Avenue Elmsford, NY 10523 | | - | 455 East Bay Drive Long Beach, New York 11561 | | X | X | | |
| Value \$ | | | 6,000,000.00 | | | | 23,771.85 | Unknown |
| Subtotal (Total of this page) | | | | | | | 47,871.89 | 0.00 |

10 continuation sheets attached

In re Long Beach Medical CenterCase No. 14-70593

Debtor

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

(Continuation Sheet)

| CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.) | C O D E B O R R | Husband, Wife, Joint, or Community | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL | UNSECURED PORTION, IF ANY |
|--|--------------------------------------|--|--|--|--------------------------------------|--|---------------------------------|
| | | DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN | | | | | |
| Account No. | | | | | | | |
| Baxter Healthcare Corp One Baxter Parkway Deerfield, IL 60015 | - | Equipment Lease | | | X | | |
| Value \$ | | 0.00 | | | | Unknown | Unknown |
| Account No. | | | | | | | |
| Beckman Coulter Capital 1111 Old Eagle School Rd Wayne, PA 19087 | - | Equipment Lease | | | X | | |
| Value \$ | | 0.00 | | | | Unknown | Unknown |
| Account No. | | | | | | | |
| DASNY 515 Broadway Albany, NY 12207 | - | Mortgage 455 East Bay Drive Long Beach, New York 11561 | | | | | |
| Value \$ | | 6,000,000.00 | | | | 1,252,000.00 | Unknown |
| Account No. | | | | | | | |
| David Lutwin 115 West Olive Street Long Beach, NY 11561 | X - | Judgment 455 East Bay Drive Long Beach, New York 11561 | | | | | |
| Value \$ | | 6,000,000.00 | | | | 11,574.79 | Unknown |
| Account No. | | | | | | | |
| Dynaire Corp 134 Herricks Road Mineola, NY 11501 | - | Mechanic's Lien 455 East Bay Drive Long Beach, New York 11561 | | | X X | | |
| Value \$ | | 6,000,000.00 | | | | 56,253.00 | Unknown |
| Subtotal (Total of this page) | | | | | | 1,319,827.79 | 0.00 |

Sheet 1 of 10 continuation sheets attached to
Schedule of Creditors Holding Secured Claims

B6D (Official Form 6D) (12/07) - Cont.

In re **Long Beach Medical Center**Case No. **14-70593**

Debtor

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

(Continuation Sheet)

| CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.) | C O D E B O R R | H U S B A N D W I F E J O I N T C O M M U N I T Y | DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL | UNSECURED PORTION, IF ANY |
|---|--------------------------------------|---|--|--|--|--------------------------------------|--|---------------------------------|
| Account No. Dynamic Concrete & Con 14D Seabro Avenue Amityville, NY 11701 | | - | Mechanic's Lien 455 East Bay Drive Long Beach, New York 11561 Value \$ 6,000,000.00 | | X | X | 21,570.00 | Unknown |
| Account No. Elite Wall Systems 289-A Suburban Avenue Deer Park, NY 11729 | | - | Mechanic's Lien 455 East Bay Drive Long Beach, New York 11561 Value \$ 6,000,000.00 | | X | X | 14,000.00 | Unknown |
| Account No. Fire Command Co 475 Long Beach Blvd Long Beach, NY 11561 | | - | Mechanic's Lien 455 East Bay Drive Long Beach, New York 11561 Value \$ 6,000,000.00 | | X | X | 211,985.34 | Unknown |
| Account No. Firestop Solutions 1655 Sycamore Avenue Bohemia, NY 11716 | | - | Mechanic's Lien 455 East Bay Drive Long Beach, New York 11561 Value \$ 6,000,000.00 | | X | X | 76,585.70 | Unknown |
| Account No. First Central Savings c/o Arthur Goldstein Spizz Cohen & Serchuk 425 Park Avenue New York, NY 10022 | | - | Mortgage 455 East Bay Drive Long Beach, New York 11561 Value \$ 6,000,000.00 | | | | 2,641,000.00 | Unknown |
| Sheet 2 of 10 continuation sheets attached to Schedule of Creditors Holding Secured Claims | | | | | | | Subtotal (Total of this page) 2,965,141.04 | 0.00 |

B6D (Official Form 6D) (12/07) - Cont.

In re Long Beach Medical CenterCase No. 14-70593

Debtor

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

(Continuation Sheet)

| CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.) | C O D E B O R R | H U S B A N D, W I F E, J O I N T, O R C O M M U N I T Y | DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL | UNSECURED PORTION, IF ANY |
|--|--------------------------------------|--|--|--|--|--------------------------------------|--|---------------------------------|
| | | | | | | | | |
| Account No. | | | Mechanic's Lien | | | | | |
| FJF Electric, Inc. 4242 Merrick Road Massapequa, NY 11758 | - | | 415 East State Street Long Beach, New York 11561 | | X | X | | |
| Value \$ | | | 371,200.00 | | | | 12,500.00 | Unknown |
| Account No. | | | Mechanic's Lien | | | | | |
| FJF Electric, Inc. 4242 Merrick Road Massapequa, NY 11758 | - | | 425 East State Street Long Beach, New York 11561 | | X | X | | |
| Value \$ | | | 380,400.00 | | | | 12,500.00 | Unknown |
| Account No. | | | Equipment Lease | | | | | |
| General Electric Capital 20225 Watertown Blvd Suite 300 Brookfield, WI 53045 | - | | | | X | | | |
| Value \$ | | | 0.00 | | | | Unknown | Unknown |
| Account No. | | | Mechanic's Lien | | | | | |
| Grandview Contracting 28 Garfield Avenue Bay Shore, NY 11706 | - | | 455 East Bay Drive Long Beach, New York 11561 | | X | X | | |
| Value \$ | | | 6,000,000.00 | | | | 52,873.32 | Unknown |
| Account No. | | | Judgment | | | | | |
| Horizon Health Care Staff Arthur Banks, Esq. Office of Jared Turman 1980 Broadcast Plaza Merrick, NY 11566 | X | - | 455 East Bay Drive Long Beach, New York 11561 | | | | | |
| Value \$ | | | 6,000,000.00 | | | | 85,837.42 | Unknown |
| Subtotal (Total of this page) | | | | | | | 163,710.74 | 0.00 |

Sheet 3 of 10 continuation sheets attached to
Schedule of Creditors Holding Secured Claims

B6D (Official Form 6D) (12/07) - Cont.

In re Long Beach Medical CenterCase No. 14-70593

Debtor

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

(Continuation Sheet)

| CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.) | C O D E B O R R | H W J C | Husband, Wife, Joint, or Community | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL | UNSECURED PORTION, IF ANY |
|--|--------------------------------------|------------------|--|--|--|--------------------------------------|--|---------------------------------|
| | | | DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN | | | | | |
| Account No. | | | Mechanic's Lien | | | | | |
| Iconic Mechanical, LLC 64-70 Maurice Avenue Maspeth, NY 11378 | | - | 455 East Bay Drive Long Beach, New York 11561 | | X | X | | |
| | | | Value \$ 6,000,000.00 | | | | 17,600.00 | Unknown |
| Account No. | | | Judgment | | | | | |
| Jennifer Danzig 769 Shore Road Long Beach, NY 11561 | | - | 455 East Bay Drive Long Beach, New York 11561 | | | | | |
| | | | Value \$ 6,000,000.00 | | | | 105,025.00 | Unknown |
| Account No. | | | Judgment | | | | | |
| Joel Lutwin 20 Fifth Avenue Apt 13-A New York, NY | X | - | 455 East Bay Drive Long Beach, New York 11561 | | | | | |
| | | | Value \$ 6,000,000.00 | | | | 11,574.79 | Unknown |
| Account No. | | | Mechanic's Lien | | | | | |
| JRM Construction c/o Clark Guldin, Esq. 242 West 36th Street 9th Floor New York, NY 10018 | | - | 455 East Bay Drive Long Beach, New York 11561 | | X | X | | |
| | | | Value \$ 6,000,000.00 | | | | 1,737,496.00 | Unknown |
| Account No. | | | Mechanic's Lien | | | | | |
| Maccarone Plumbing, Inc. 10 Sea Cliff Avenue Glen Cove, NY 11542 | | - | 425 East State Street Long Beach, New York 11561 | | X | X | | |
| | | | Value \$ 380,400.00 | | | | 27,498.91 | Unknown |
| Subtotal | | | | | | | 1,899,194.70 | 0.00 |
| (Total of this page) | | | | | | | | |

Sheet 4 of 10 continuation sheets attached to
Schedule of Creditors Holding Secured Claims

B6D (Official Form 6D) (12/07) - Cont.

In re Long Beach Medical CenterCase No. 14-70593

Debtor

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS (Continuation Sheet)

| CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.) | C O D E B O R | H U S B A N D, W I F E, J O I N T, O R C O M M U N I T Y | DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL | UNSECURED PORTION, IF ANY |
|--|---------------------------------|--|--|--|--|--------------------------------------|--|---------------------------------|
| | | | | | | | | |
| Account No. | | | Equipment | | | | | |
| Med One Capital Funding 10712 South 1300 East Sandy, UT 84094 | - | | | | X | | | |
| | | | Value \$ 0.00 | | | | Unknown | Unknown |
| Account No. | | | Equipment Lease | | | | | |
| Medline Industries Attn: Robert M. Hirsch Arent Fox, LLP 1675 Broadway New York, NY 10019 | - | | | | X | | | |
| | | | Value \$ 0.00 | | | | Unknown | Unknown |
| Account No. | | | Mechanic's Lien | | | | | |
| Modular Services Company 500 E. Britton Road Oklahoma City, OK 73114 | - | | 455 East Bay Drive Long Beach, New York 11561 | | X | X | | |
| | | | Value \$ 6,000,000.00 | | | | 18,678.00 | Unknown |
| Account No. | | | Mechanic's Lien | | | | | |
| Mostly Mica 77-B Cleveland Avenue Bay Shore, NY 11706 | - | | 415 East State Street Long Beach, New York 11561 | | X | X | | |
| | | | Value \$ 371,200.00 | | | | 3,063.00 | Unknown |
| Account No. | | | Mechanic's Lien | | | | | |
| Mostly Mica, Inc. 77-B Cleveland Avenue Bay Shore, NY 11706 | - | | 425 East State Street Long Beach, New York 11561 | | X | X | | |
| | | | Value \$ 380,400.00 | | | | 12,250.00 | Unknown |
| Subtotal | | | | | | | 33,991.00 | 0.00 |
| (Total of this page) | | | | | | | | |

Sheet 5 of 10 continuation sheets attached to
Schedule of Creditors Holding Secured Claims

B6D (Official Form 6D) (12/07) - Cont.

In re **Long Beach Medical Center**Case No. **14-70593**

Debtor

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

(Continuation Sheet)

| CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.) | C O D E D E B I T O R | H U S B A N D, W I F E, J O I N T, O R C O M M U N I T Y | DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL | UNSECURED PORTION, IF ANY |
|---|---|--|--|--|--|--------------------------------------|--|---------------------------------|
| | | | | | | | | |
| Account No. | | | Mechanic's Lien | | | | | |
| Mostly Mica, Inc. 77-B Cleveland Avenue Bay Shore, NY 11706 | - | | 415 East State Street Long Beach, New York 11561 | | X | X | | |
| | | | Value \$ 371,200.00 | | | | 12,250.00 | Unknown |
| Account No. | | | Mechanic's Lien | | | | | |
| Mostly Mica, Inc. 77 Cleveland Avenue Bay Shore, NY 11706 | - | | 425 East State Street Long Beach, New York 11561 | | X | X | | |
| | | | Value \$ 380,400.00 | | | | 6,125.00 | Unknown |
| Account No. | | | Mechanic's Lien | | | | | |
| Northstar Recovery Attn: Michael Schein Vedder Price, PC 1633 Broadway, 47th Fl New York, NY 10019 | - | | 455 East Bay Drive Long Beach, New York 11561 | | X | X | | |
| | | | Value \$ 6,000,000.00 | | | | 3,746,537.00 | Unknown |
| Account No. | | | Tax Lien | | | | | |
| NYS Dept of Labor U.I. Employer Services 301 W. Old Country Road Hicksville, NY 11801 | - | | 455 East Bay Drive Long Beach, New York 11561 | X | X | X | | |
| | | | Value \$ 6,000,000.00 | | | | 3,012,334.14 | Unknown |
| Account No. | | | Mechanic's Lien | | | | | |
| Omega Environmental Ser. c/o Hartmann Doherty Rosa 65 Route 4 East Attn: Pual Doherty, Esq. River Edge, NJ 07661 | - | | 455 East Bay Drive Long Beach, New York 11561 | | X | X | | |
| | | | Value \$ 6,000,000.00 | | | | 16,250.00 | 16,250.00 |
| Subtotal | | | | | | | 6,793,496.14 | 16,250.00 |
| (Total of this page) | | | | | | | | |

Sheet 6 of 10 continuation sheets attached to
Schedule of Creditors Holding Secured Claims

In re Long Beach Medical CenterCase No. 14-70593

Debtor

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

(Continuation Sheet)

| CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.) | C O D E B O R | H U S B A N D, W I F E, J O I N T, O R C O M M U N I T Y | DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL | UNSECURED PORTION, IF ANY |
|--|---------------------------------|--|--|--|--|--------------------------------------|--|---------------------------------|
| | | | | | | | | |
| Account No. | | | Mechanic's Lien | | | | | |
| Par Plumbing Co., Inc. 60 North Prospect Avenue Lynbrook, NY 11563 | - | | 455 East Bay Drive Long Beach, New York 11561 | | X | X | | |
| Value \$ | | | 6,000,000.00 | | | | 208,973.41 | Unknown |
| Account No. | | | Mechanic's Lien | | | | | |
| Park East Construction 266 East Jericho Turnpike Huntington Station, NY 11746 | - | | 425 East State Street Long Beach, New York 11561 | | X | X | | |
| Value \$ | | | 380,400.00 | | | | 21,322.68 | Unknown |
| Account No. | | | Mechanic's Lien | | | | | |
| Park East Construction 266 East Jericho Turnpike Huntington Station, NY 11746 | - | | 415 East State Street Long Beach, New York 11561 | | X | X | | |
| Value \$ | | | 371,200.00 | | | | 16,688.00 | Unknown |
| Account No. | | | Tax Lien | | | | | |
| PBGC 1200 K Street, N.W. Washington, DC 20005 | X | - | 455 East Bay Drive Long Beach, New York 11561 | X | X | X | | |
| Value \$ | | | 6,000,000.00 | | | | 9,135,017.00 | Unknown |
| Account No. | | | Ultrasound Equipment Lease | | | | | |
| Philips Medical Capital 1111 Old Eagle School Rd Wayne, PA 19087 | - | | | | X | | | |
| Value \$ | | | 0.00 | | | | Unknown | Unknown |
| Subtotal (Total of this page) | | | | | | | 9,382,001.09 | 0.00 |

Sheet 7 of 10 continuation sheets attached to
Schedule of Creditors Holding Secured Claims

B6D (Official Form 6D) (12/07) - Cont.

In re Long Beach Medical CenterCase No. 14-70593

Debtor

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

(Continuation Sheet)

| CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.) | C O D E D E B I T O R | H W J C | Husband, Wife, Joint, or Community | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL | UNSECURED PORTION, IF ANY |
|--|---|------------------|--|--|--|--------------------------------------|--|---------------------------------|
| | | | DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN | | | | | |
| Account No. | | | | | | | | |
| Republic Bank 1560 So. Renaissance Towne Drive, Ste 260 Bountiful, UT 84010 | | - | | | X | | | |
| | | | Equipment Lease | | | | | |
| | | | Value \$ 0.00 | | | | Unknown | Unknown |
| Account No. | | | | | | | | |
| Rolands Electric 307 Suburan Avenue Deer Park, NY 11729 | | - | | | X | X | | |
| | | | Mechanic's Lien | | | | | |
| | | | 455 E. Bay Drive Long Beach, NY | | | | | |
| | | | Value \$ 0.00 | | | | 698,600.46 | Unknown |
| Account No. | | | | | | | | |
| Siemens Financial Service 170 Wood Avenue South Iselin, NJ 08830 | | - | | | X | | | |
| | | | Equipment Lease | | | | | |
| | | | Value \$ 0.00 | | | | Unknown | Unknown |
| Account No. | | | | | | | | |
| South Nassau Communities One Healthy Way Oceanside, NY 11572 | X | - | | | | | | |
| | | | Pre-Petition Credit Agreement | | | | | |
| | | | 455 East Bay Drive Long Beach, New York 11561 | | | | | |
| | | | Value \$ 6,000,000.00 | | | | 1,500,000.00 | Unknown |
| Account No. | | | | | | | | |
| United Services, Inc. 152 Depot Road Huntington Station, NY 11746 | | - | | | X | X | | |
| | | | Mechanic's Lien | | | | | |
| | | | 425 East State Street Long Beach, New York 11561 | | | | | |
| | | | Value \$ 380,400.00 | | | | 85,235.65 | Unknown |
| Subtotal (Total of this page) | | | | | | | 2,283,836.11 | 0.00 |

Sheet 8 of 10 continuation sheets attached to
Schedule of Creditors Holding Secured Claims

B6D (Official Form 6D) (12/07) - Cont.

In re Long Beach Medical CenterCase No. 14-70593

Debtor

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

(Continuation Sheet)

| CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.) | C O D E B O R R | H W J C | Husband, Wife, Joint, or Community | DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL | UNSECURED PORTION, IF ANY |
|--|--------------------------------------|------------------|------------------------------------|--|--|--|--------------------------------------|--|---------------------------------|
| | | | | | | | | | |
| Account No. | | | | Mechanic's Lien | | | | | |
| United Services, Inc. 152 Depot Road Huntington Station, NY 11746 | | - | | 415 East State Street Long Beach, New York 11561 | | X | X | | |
| Value \$ | | | | 371,200.00 | | | | 43,235.65 | Unknown |
| Account No. | | | | Phone System Lease | | | | | |
| Verizon Credit, Inc. 201 N. Franklin Street Suite 3300 Tampa, FL 33602 | | - | | | | X | | | |
| Value \$ | | | | 0.00 | | | | Unknown | Unknown |
| Account No. | | | | Mechanic's Lien | | | | | |
| XTDR LLC 1 Bishop Street Norwalk, CT 06851 | | - | | 455 East Bay Drive Long Beach, New York 11561 | | X | X | | |
| Value \$ | | | | 6,000,000.00 | | | | 103,354.74 | Unknown |
| Account No. | | | | Mechanic's Lien | | | | | |
| XTDR, LLC 1 Bishop Street Norwalk, CT 06851 | | - | | 455 East Bay Drive Long Beach, New York 11561 | | X | X | | |
| Value \$ | | | | 6,000,000.00 | | | | 32,118.21 | Unknown |
| Account No. | | | | Mechanic's Lien | | | | | |
| XTDR, LLC 1 Bishop Street NJ 08651 | | - | | 761 Franklin Boulevard Long Beach, New York 11561 | | X | X | | |
| Value \$ | | | | 261,200.00 | | | | 2,779.29 | Unknown |
| Subtotal (Total of this page) | | | | | | | | 181,487.89 | 0.00 |

Sheet 9 of 10 continuation sheets attached to
Schedule of Creditors Holding Secured Claims

In re Long Beach Medical CenterCase No. 14-70593

Debtor

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

(Continuation Sheet)

| CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.) | C O D E D E B I T O R | H U S B A N D, W I F E, J O I N T, O R C O M M U N I T Y | DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL | UNSECURED PORTION, IF ANY |
|--|---|--|--|--|--|--------------------------------------|--|---------------------------------|
| | | | | | | | | |
| Account No. | | | Mechanic's Lien | | | | | |
| XTDR, LLC 1 Bishop Street Norwalk, CT 06850 | - | | 765 Franklin Boulevard Long Beach, New York 11561 | | X | X | | |
| Value \$ | | | 201,800.00 | | | | 37,144.04 | Unknown |
| Account No. | | | Mechanic's Lien | | | | | |
| XTDR, LLC 1 Bishop Street Norwalk, CT 06850 | - | | 757 Lincoln Boulevard Long Beach, NY 11561 | | X | X | | |
| Value \$ | | | 300,500.00 | | | | 5,217.30 | Unknown |
| Account No. | | | Mechanic's Lien | | | | | |
| XTDR, LLC 1 Bishop Street Norwalk, CT 06850 | - | | 711 Lincoln Boulevard Long Beach, New York 11561 | | X | X | | |
| Value \$ | | | 119,800.00 | | | | 12,545.60 | Unknown |
| Account No. | | | Mechanic's Lien | | | | | |
| XTDR, LLC 1 Bishop Street Norwalk, CT 06851 | - | | 416 E. Bay Drive Long Beach, NY 11561 | | X | X | | |
| Value \$ | | | Unknown | | | | 43,999.81 | Unknown |
| Account No. | | | Mechanic's Lien | | | | | |
| XTDR, LLC 1 Bishop Street Norwalk, CT 06851 | - | | 430 East Bay Drive Long Beach, NY 11561 | | X | X | | |
| Value \$ | | | Unknown | | | | 22,873.00 | Unknown |
| Subtotal (Total of this page) | | | | | | | 121,779.75 | 0.00 |
| Total (Report on Summary of Schedules) | | | | | | | 25,192,338.14 | 16,250.00 |

Sheet 10 of 10 continuation sheets attached to
Schedule of Creditors Holding Secured Claims

In re **Long Beach Medical Center**Case No. **14-70593**

Debtor

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)☐ **Domestic support obligations**

Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).

☐ **Extensions of credit in an involuntary case**

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).

☒ **Wages, salaries, and commissions**

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$12,475* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

☐ **Contributions to employee benefit plans**

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

☐ **Certain farmers and fishermen**

Claims of certain farmers and fishermen, up to \$6,150* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).

☐ **Deposits by individuals**

Claims of individuals up to \$2,775* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).

☒ **Taxes and certain other debts owed to governmental units**

Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).

☐ **Commitments to maintain the capital of an insured depository institution**

Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507(a)(9).

☐ **Claims for death or personal injury while debtor was intoxicated**

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

* Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

In re **Long Beach Medical Center**Case No. **14-70593**

Debtor

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS (Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

| CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.) | C O D E B O R R | H W J C | Husband, Wife, Joint, or Community | D A T E C L A I M W A S I N C U R R E D A N D C O N S I D E R A T I O N F O R C L A I M | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM | AMOUNT NOT ENTITLED TO PRIORITY, IF ANY |
|---|--------------------------------------|------------------|------------------------------------|--|--|--|--------------------------------------|--------------------|---|
| | | | | | | | | | AMOUNT ENTITLED TO PRIORITY |
| Account No. | | | | 2/18/2014 | | | | | |
| Ajayi, Valerie | | - | | | | | | 0.00 | |
| | | | | | | | | 0.00 | 0.00 |
| Account No. | | | | 2/18/2014 | | | | | |
| Akerman, Stacie Ann | | - | | | | | | 8,146.91 | |
| | | | | | | | | 8,146.91 | 0.00 |
| Account No. | | | | 2/18/2014 | | | | | |
| Alexander, Brandy | | - | | | | | | 100.28 | |
| | | | | | | | | 100.28 | 0.00 |
| Account No. | | | | 2/18/2014 | | | | | |
| Alkire, Frances | | - | | | | | | 1,465.91 | |
| | | | | | | | | 1,465.91 | 0.00 |
| Account No. | | | | 2/18/2014 | | | | | |
| Alpren, Diane | | - | | | | | | 9,618.00 | |
| | | | | | | | | 9,618.00 | 0.00 |
| Subtotal | | | | | | | | 19,331.10 | 19,331.10 |
| (Total of this page) | | | | | | | | 19,331.10 | 0.00 |

Sheet **1** of **91** continuation sheets attached to
 Schedule of Creditors Holding Unsecured Priority Claims

In re Long Beach Medical CenterCase No. 14-70593

Debtor

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS
(Continuation Sheet)Wages, salaries, and commissions

TYPE OF PRIORITY

| CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.) | C O D E D E B T O R | H W J C | Husband, Wife, Joint, or Community | D I S P U T E D | U N L I Q U I D A T E D | C O N T I N G E N T | AMOUNT OF CLAIM | AMOUNT NOT ENTITLED TO PRIORITY, IF ANY |
|---|--|------------------|------------------------------------|--------------------------------------|--|--|--------------------|---|
| | | | | | | | | AMOUNT ENTITLED TO PRIORITY |
| Account No. | | | 2/18/2014 | | | | | |
| Alston, Crystal | | - | | | | | 2,732.68 | |
| | | | | | | | 2,732.68 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Alvarez, Eddie | | - | | | | | 3,768.23 | |
| | | | | | | | 5,146.13 | 1,377.90 |
| Account No. | | | 2/18/2014 | | | | | |
| Amin, Mohammed | | - | | | | | 3,691.24 | |
| | | | | | | | 3,691.24 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Amsterdam, Jacqueline | | - | | | | | 2,108.70 | |
| | | | | | | | 2,108.70 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Anozier, Julie | | - | | | | | 98.03 | |
| | | | | | | | 98.03 | 0.00 |
| Subtotal (Total of this page) | | | | | | | 13,776.78 | 12,398.88 1,377.90 |

Sheet 2 of 91 continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

B6E (Official Form 6E) (4/13) - Cont.

In re **Long Beach Medical Center**Case No. **14-70593**

Debtor

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS (Continuation Sheet)

Wages, salaries, and commissions
TYPE OF PRIORITY

| CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.) | C O D E B O R R | H W J C | Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM | AMOUNT NOT ENTITLED TO PRIORITY, IF ANY |
|---|--------------------------------------|------------------|--|--|--|--------------------------------------|--------------------|---|
| | | | | | | | | AMOUNT ENTITLED TO PRIORITY |
| Account No. | | | 2/18/2014 | | | | | |
| Antoine, Farrah | | - | | | | | 205.80 | |
| | | | | | | | 205.80 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Armstrong, Alison | | - | | | | | 196.05 | |
| | | | | | | | 196.05 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Artusa, Frank | | - | | | | | 7,031.05 | |
| | | | | | | | 7,031.05 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Astacio, Edna | | - | | | | | 178.03 | |
| | | | | | | | 178.03 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Attanasio, Margaret | | - | | | | | 96.14 | |
| | | | | | | | 96.14 | 0.00 |
| Subtotal | | | | | | | 7,707.07 | 7,707.07 |
| (Total of this page) | | | | | | | 7,707.07 | 0.00 |

 Sheet **3** of **91** continuation sheets attached to
 Schedule of Creditors Holding Unsecured Priority Claims

B6E (Official Form 6E) (4/13) - Cont.

In re **Long Beach Medical Center**Case No. **14-70593**

Debtor

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS (Continuation Sheet)

Wages, salaries, and commissions
TYPE OF PRIORITY

| CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.) | C O D E D E B T O R | H U S B A N D , W I F E , J O I N T , O R C O M M U N I T Y | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM | AMOUNT NOT ENTITLED TO PRIORITY, IF ANY |
|---|--|--|--|--|--|--------------------------------------|--------------------|---|
| | | | | | | | | AMOUNT ENTITLED TO PRIORITY |
| Account No. | | | 2/18/2014 | | | | | |
| AUGUSTIN, JULIE | | | | | | | | 994.70 |
| | | | | | | | 994.70 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Austin, Hyacinth | | | | | | | | 1,262.13 |
| | | | | | | | 1,262.13 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Bachynska, Lesya | | | | | | | | 1,418.29 |
| | | | | | | | 2,531.93 | 1,113.64 |
| Account No. | | | 2/18/2014 | | | | | |
| Badrajan, Georgette | | | | | | | | 1,725.63 |
| | | | | | | | 1,725.63 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Balcuk, John | | | | | | | | 1,735.75 |
| | | | | | | | 1,735.75 | 0.00 |
| Subtotal | | | | | | | | 7,136.50 |
| (Total of this page) | | | | | | | 8,250.14 | 1,113.64 |

 Sheet **4** of **91** continuation sheets attached to
 Schedule of Creditors Holding Unsecured Priority Claims

In re **Long Beach Medical Center**Case No. **14-70593**

Debtor

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS (Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

| CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.) | C O D E B O R | H W J C | Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM | AMOUNT NOT ENTITLED TO PRIORITY, IF ANY |
|---|---------------------------------|------------------|--|--|--|--------------------------------------|--------------------|---|
| | | | | | | | | AMOUNT ENTITLED TO PRIORITY |
| Account No. | | | 2/18/2014 | | | | | |
| Balcuk, Josephine | | - | | | | | | 2,175.80 |
| | | | | | | | 2,175.80 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Banks, Camille T | | - | | | | | | 2,515.13 |
| | | | | | | | 2,515.13 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Banks, Edward C | | - | | | | | | 16,327.20 |
| | | | | | | | 17,977.44 | 1,650.24 |
| Account No. | | | 2/18/2014 | | | | | |
| BARBACENA, ARMIN | | - | | | | | | 402.48 |
| | | | | | | | 402.48 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Barnett, Ilene | | - | | | | | | 1,426.40 |
| | | | | | | | 1,426.40 | 0.00 |
| Subtotal | | | | | | | 24,497.25 | 22,847.01 |
| (Total of this page) | | | | | | | 24,497.25 | 1,650.24 |

Sheet **5** of **91** continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

In re Long Beach Medical CenterCase No. 14-70593

Debtor

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS
(Continuation Sheet)**Wages, salaries, and commissions**

TYPE OF PRIORITY

| CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.) | C O D E B O R | H W J C | Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM | AMOUNT NOT ENTITLED TO PRIORITY, IF ANY |
|---|---------------------------------|------------------|--|--|--|--------------------------------------|--------------------|---|
| | | | | | | | | AMOUNT ENTITLED TO PRIORITY |
| Account No. | | | 2/18/2014 | | | | | |
| Barriga, Jenny | | - | | | | | 5,218.76 | |
| | | | | | | | 5,218.76 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Bastien, Marie | | - | | | | | 1,064.90 | |
| | | | | | | | 1,064.90 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Bell-Plater, Cynthia | | - | | | | | 868.61 | |
| | | | | | | | 868.61 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Bender-Low, Rose A | | - | | | | | 2,121.00 | |
| | | | | | | | 2,121.00 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Bermudez, Maureen A | | - | | | | | 1,643.81 | |
| | | | | | | | 1,643.81 | 0.00 |
| Subtotal (Total of this page) | | | | | | | 10,917.08 | 0.00 |

Sheet **6** of **91** continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

B6E (Official Form 6E) (4/13) - Cont.

In re **Long Beach Medical Center**Case No. **14-70593**

Debtor

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS (Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

| CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.) | C O D E D E B I T O R | H W J C | Husband, Wife, Joint, or Community | D A T E C L A I M W A S I N C U R R E D A N D C O N S I D E R A T I O N F O R C L A I M | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM | AMOUNT NOT ENTITLED TO PRIORITY, IF ANY |
|---|---|------------------|------------------------------------|--|--|--|--------------------------------------|--------------------|---|
| | | | | | | | | | AMOUNT ENTITLED TO PRIORITY |
| Account No. | | | | 2/18/2014 | | | | | |
| Bershad, Eileen | | | | | | | | | 8,180.77 |
| | | | | | | | | 11,498.17 | 3,317.40 |
| Account No. | | | | 2/18/2014 | | | | | |
| Bifulco, Diane | | | | | | | | | 602.40 |
| | | | | | | | | 602.40 | 0.00 |
| Account No. | | | | 2/18/2014 | | | | | |
| Blackwell, Patricia | | | | | | | | | 95.85 |
| | | | | | | | | 95.85 | 0.00 |
| Account No. | | | | 2/18/2014 | | | | | |
| Blake, Terry-Ann | | | | | | | | | 849.55 |
| | | | | | | | | 849.55 | 0.00 |
| Account No. | | | | 2/18/2014 | | | | | |
| Blue, Cynthia | | | | | | | | | 116.10 |
| | | | | | | | | 116.10 | 0.00 |
| Subtotal | | | | | | | | | 9,844.67 |
| (Total of this page) | | | | | | | | 13,162.07 | 3,317.40 |

Sheet **7** of **91** continuation sheets attached to
 Schedule of Creditors Holding Unsecured Priority Claims

B6E (Official Form 6E) (4/13) - Cont.

In re **Long Beach Medical Center**Case No. **14-70593**

Debtor

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS (Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

| CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.) | C O D E B O R R | H U S B A N D W I F E J O I N T C O M M U N I T Y | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM | AMOUNT NOT ENTITLED TO PRIORITY, IF ANY |
|---|--------------------------------------|---|--|--|--|--------------------------------------|--------------------|---|
| | | | | | | | | AMOUNT ENTITLED TO PRIORITY |
| Account No. | | | 2/18/2014 | | | | | |
| Bradford, Patricia | | | | | | | | 194.43 |
| | | | | | | | 194.43 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Brando, Kathleen M | | | | | | | | 374.71 |
| | | | | | | | 374.71 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Braun, Susanne | | | | | | | | 5,326.08 |
| | | | | | | | 5,326.08 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Bravo, Nibaldo P. | | | | | | | | 12,778.13 |
| | | | | | | | 14,486.33 | 1,708.20 |
| Account No. | | | 2/18/2014 | | | | | |
| Briere, Tricia | | | | | | | | 334.82 |
| | | | | | | | 334.82 | 0.00 |
| Subtotal | | | | | | | | 19,008.17 |
| (Total of this page) | | | | | | | 20,716.37 | 1,708.20 |

Sheet **8** of **91** continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

In re Long Beach Medical CenterCase No. 14-70593

Debtor

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS (Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

| CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.) | C O D E B O R R | H W J C | Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM | AMOUNT NOT ENTITLED TO PRIORITY, IF ANY |
|---|--------------------------------------|------------------|--|--|--|--------------------------------------|--------------------|---|
| | | | | | | | | AMOUNT ENTITLED TO PRIORITY |
| Account No. | | | 2/18/2014 | | | | | |
| Brinkies, Milagros | | - | | | | | 268.91 | |
| | | | | | | | 268.91 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Brochu, Ginger | | - | | | | | 3,321.45 | |
| | | | | | | | 3,321.45 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Bromley, Margaret | | - | | | | | 7,168.98 | |
| | | | | | | | 7,168.98 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Brown, Connie | | - | | | | | 556.80 | |
| | | | | | | | 556.80 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Brown, Delroy | | - | | | | | 1,589.16 | |
| | | | | | | | 1,589.16 | 0.00 |
| Subtotal | | | | | | | 12,905.30 | 12,905.30 |
| (Total of this page) | | | | | | | 12,905.30 | 0.00 |

Sheet 9 of 91 continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

B6E (Official Form 6E) (4/13) - Cont.

In re **Long Beach Medical Center**Case No. **14-70593**

Debtor

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS (Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

| CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.) | C O D E B O R R | H W J C | Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM | AMOUNT NOT ENTITLED TO PRIORITY, IF ANY |
|---|--------------------------------------|------------------|--|--|--|--------------------------------------|--------------------|---|
| | | | | | | | | AMOUNT ENTITLED TO PRIORITY |
| Account No. | | | 2/18/2014 | | | | | |
| Brown, LaShaun | | - | | | | | 185.71 | |
| | | | | | | | 185.71 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Bruce, Ronald | | - | | | | | 749.10 | |
| | | | | | | | 749.10 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Burgos, Harold | | - | | | | | 312.25 | |
| | | | | | | | 312.25 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Burgos, Jeanette | | - | | | | | 1,409.81 | |
| | | | | | | | 1,409.81 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Busgang, Danielle | | - | | | | | 1,756.88 | |
| | | | | | | | 1,756.88 | 0.00 |
| Subtotal | | | | | | | 4,413.75 | |
| (Total of this page) | | | | | | | 4,413.75 | 0.00 |

Sheet **10** of **91** continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

In re **Long Beach Medical Center**Case No. **14-70593**

Debtor

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS (Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

| CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.) | C O D E D E B I T O R | H W J C | Husband, Wife, Joint, or Community | D A T E C L A I M W A S I N C U R R E D A N D C O N S I D E R A T I O N F O R C L A I M | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM | AMOUNT NOT ENTITLED TO PRIORITY, IF ANY |
|---|---|------------------|------------------------------------|--|--|--|--------------------------------------|--------------------|---|
| | | | | | | | | | AMOUNT ENTITLED TO PRIORITY |
| Account No. | | | | 2/18/2014 | | | | | |
| Buttacavoli, Janie | | - | | | | | | 1,250.56 | |
| | | | | | | | | 1,250.56 | 0.00 |
| Account No. | | | | 2/18/2014 | | | | | |
| BUTTS, OSCAR L | | - | | | | | | 7,956.00 | |
| | | | | | | | | 9,529.20 | 1,573.20 |
| Account No. | | | | 2/18/2014 | | | | | |
| Butts, Peggy | | - | | | | | | 811.61 | |
| | | | | | | | | 811.61 | 0.00 |
| Account No. | | | | 2/18/2014 | | | | | |
| Byrnes, Eileen | | - | | | | | | 80.40 | |
| | | | | | | | | 80.40 | 0.00 |
| Account No. | | | | 2/18/2014 | | | | | |
| Cabaron, Napoleon B | | - | | | | | | 3,591.54 | |
| | | | | | | | | 3,591.54 | 0.00 |
| Subtotal | | | | | | | | 15,263.31 | 13,690.11 |
| (Total of this page) | | | | | | | | 15,263.31 | 1,573.20 |

Sheet **11** of **91** continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

In re Long Beach Medical CenterCase No. 14-70593

Debtor

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS (Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

| CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.) | C O D E B O R R | H W J C | Husband, Wife, Joint, or Community | D A T E C L A I M W A S I N C U R R E D A N D C O N S I D E R A T I O N F O R C L A I M | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM | AMOUNT NOT ENTITLED TO PRIORITY, IF ANY |
|---|--------------------------------------|------------------|------------------------------------|--|--|--|--------------------------------------|--------------------|---|
| | | | | | | | | | AMOUNT ENTITLED TO PRIORITY |
| Account No. | | | | 2/18/2014 | | | | | |
| Cadet Gelin, Carole | | | | | | | | 3,483.16 | |
| | | | | | | | | 3,483.16 | 0.00 |
| Account No. | | | | 2/18/2014 | | | | | |
| Cain, Sakina | | | | | | | | 0.00 | |
| | | | | | | | | 0.00 | 0.00 |
| Account No. | | | | 2/18/2014 | | | | | |
| Camangeg, Abraham | | | | | | | | 2,480.96 | |
| | | | | | | | | 2,480.96 | 0.00 |
| Account No. | | | | 2/18/2014 | | | | | |
| Campbell, Darnell | | | | | | | | 380.73 | |
| | | | | | | | | 380.73 | 0.00 |
| Account No. | | | | 2/18/2014 | | | | | |
| Carrico, Jeffrey | | | | | | | | 6,221.18 | |
| | | | | | | | | 6,221.18 | 0.00 |
| Subtotal | | | | | | | | 12,566.03 | 12,566.03 |
| (Total of this page) | | | | | | | | 12,566.03 | 0.00 |

Sheet 12 of 91 continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

B6E (Official Form 6E) (4/13) - Cont.

In re **Long Beach Medical Center**Case No. **14-70593**

Debtor

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS (Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

| CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.) | C O D E B O R | H U S B A N D W I F E J O I N T O R | Husband, Wife, Joint, or Community | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM | AMOUNT NOT ENTITLED TO PRIORITY, IF ANY |
|---|---------------------------------|--|------------------------------------|--|--|--------------------------------------|--------------------|---|
| | | | | | | | | AMOUNT ENTITLED TO PRIORITY |
| Account No. | | | 2/18/2014 | | | | | |
| Carty, Melissa | | | | | | | | 2,838.15 |
| | | | | | | | 2,838.15 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Casey, Glenn | | | | | | | | 100.65 |
| | | | | | | | 100.65 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Cashman, Elizabeth | | | | | | | | 1,514.48 |
| | | | | | | | 1,514.48 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Castano, Nicolas | | | | | | | | 711.33 |
| | | | | | | | 711.33 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Castiglione, Cathy | | | | | | | | 3,870.83 |
| | | | | | | | 3,870.83 | 0.00 |
| Subtotal | | | | | | | | 9,035.44 |
| (Total of this page) | | | | | | | 9,035.44 | 0.00 |

Sheet **13** of **91** continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

In re **Long Beach Medical Center**Case No. **14-70593**

Debtor

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS (Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

| CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.) | C O D E B O R R | H W J C | Husband, Wife, Joint, or Community | D A T E C L A I M W A S I N C U R R E D A N D C O N S I D E R A T I O N F O R C L A I M | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM | AMOUNT NOT ENTITLED TO PRIORITY, IF ANY |
|---|--------------------------------------|------------------|------------------------------------|--|--|--|--------------------------------------|--------------------|---|
| | | | | | | | | | AMOUNT ENTITLED TO PRIORITY |
| Account No. | | | | 2/18/2014 | | | | | |
| Cayabyab, Genaro | | - | | | | | | 2,744.49 | |
| | | | | | | | | 2,744.49 | 0.00 |
| Account No. | | | | 2/18/2014 | | | | | |
| Chaiken, Harrison | | - | | | | | | 4,563.63 | |
| | | | | | | | | 4,563.63 | 0.00 |
| Account No. | | | | 2/18/2014 | | | | | |
| Chapman, Cheryl | | - | | | | | | 36,618.00 | |
| | | | | | | | | 36,618.00 | 0.00 |
| Account No. | | | | 2/18/2014 | | | | | |
| Clairine, Smail | | - | | | | | | 1,561.87 | |
| | | | | | | | | 1,561.87 | 0.00 |
| Account No. | | | | 2/18/2014 | | | | | |
| Claude, Rose M. | | - | | | | | | 2,178.39 | |
| | | | | | | | | 2,178.39 | 0.00 |
| Subtotal | | | | | | | | 47,666.38 | 47,666.38 |
| (Total of this page) | | | | | | | | 47,666.38 | 0.00 |

Sheet **14** of **91** continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

B6E (Official Form 6E) (4/13) - Cont.

In re Long Beach Medical CenterCase No. 14-70593

Debtor

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS (Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

| CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.) | C O D E B O R R | H U S B A N D W I F E J O I N T O R | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM | AMOUNT NOT ENTITLED TO PRIORITY, IF ANY |
|---|--------------------------------------|--|--|--|--|--------------------------------------|--------------------|---|
| | | | | | | | | AMOUNT ENTITLED TO PRIORITY |
| Account No. | | | 2/18/2014 | | | | | |
| Claudio, Elizabeth | | - | | | | | | 116.03 |
| | | | | | | | 116.03 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Cohn, Lewis | | - | | | | | | 22,083.34 |
| | | | | | | | 22,083.34 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Colon-Nocera, Isabel | | - | | | | | | 3,332.39 |
| | | | | | | | 3,332.39 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Conlan, Valerie | | - | | | | | | 2,625.00 |
| | | | | | | | 2,625.00 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| CONLON, MARY ELLEN | | - | | | | | | 8,330.36 |
| | | | | | | | 8,330.36 | 0.00 |
| Subtotal | | | | | | | | 36,487.12 |
| (Total of this page) | | | | | | | 36,487.12 | 0.00 |

Sheet 15 of 91 continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

B6E (Official Form 6E) (4/13) - Cont.

In re Long Beach Medical CenterCase No. 14-70593

Debtor

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS (Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

| CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.) | C O D E B O R R | H W J C | Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM | AMOUNT NOT ENTITLED TO PRIORITY, IF ANY |
|---|--------------------------------------|------------------|--|--|--|--------------------------------------|--------------------|---|
| | | | | | | | | AMOUNT ENTITLED TO PRIORITY |
| Account No. | | | 2/18/2014 | | | | | |
| Conroy, David | | - | | | | | 2,667.14 | |
| | | | | | | | 2,667.14 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Conroy, Patricia | | - | | | | | 5,073.11 | |
| | | | | | | | 5,073.11 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Conry, Annamae | | - | | | | | 3,130.86 | |
| | | | | | | | 3,130.86 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| CORBEN, JUDITH | | - | | | | | 1,181.80 | |
| | | | | | | | 2,225.80 | 1,044.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Corbitt, Dennis | | - | | | | | 1,141.88 | |
| | | | | | | | 1,141.88 | 0.00 |
| Subtotal | | | | | | | 14,238.79 | 13,194.79 |
| (Total of this page) | | | | | | | 14,238.79 | 1,044.00 |

Sheet 16 of 91 continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

B6E (Official Form 6E) (4/13) - Cont.

In re **Long Beach Medical Center**Case No. **14-70593**

Debtor

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS (Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

| CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.) | C O D E B O R R | H U S B A N D W I F E J O I N T O R | H U S B A N D W I F E J O I N T O R | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM | AMOUNT NOT ENTITLED TO PRIORITY, IF ANY | AMOUNT ENTITLED TO PRIORITY |
|---|--------------------------------------|--|--|--|--|--|--------------------------------------|--------------------|---|-----------------------------------|
| | | | | | | | | | | |
| Account No. | | | | 2/18/2014 | | | | | | |
| Corso, Kathleen | | | | | | | | | 1,565.84 | |
| | | | | | | | | 1,565.84 | | 0.00 |
| Account No. | | | | 2/18/2014 | | | | | | |
| Coutrier, Elena | | | | | | | | | 3,240.98 | |
| | | | | | | | | 3,240.98 | | 0.00 |
| Account No. | | | | 2/18/2014 | | | | | | |
| Crescimanno, Janet | | | | | | | | | 893.57 | |
| | | | | | | | | 893.57 | | 0.00 |
| Account No. | | | | 2/18/2014 | | | | | | |
| CRUPKO, ROBIN | | | | | | | | | 3,135.58 | |
| | | | | | | | | 3,135.58 | | 0.00 |
| Account No. | | | | 2/18/2014 | | | | | | |
| Cumento, Silvestre | | | | | | | | | 1,191.47 | |
| | | | | | | | | 1,191.47 | | 0.00 |
| Subtotal | | | | | | | | | 10,027.44 | |
| (Total of this page) | | | | | | | | 10,027.44 | | 0.00 |

Sheet **17** of **91** continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

In re Long Beach Medical CenterCase No. 14-70593

Debtor

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS (Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

| CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.) | C O D E B O R R | H W J C | Husband, Wife, Joint, or Community | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM | AMOUNT NOT ENTITLED TO PRIORITY, IF ANY |
|---|--------------------------------------|------------------|------------------------------------|--|--|--------------------------------------|--------------------|---|
| | | | | | | | | AMOUNT ENTITLED TO PRIORITY |
| Account No. | | | 2/18/2014 | | | | | |
| D'Angelo, Grayce | | - | | | | | 1,854.89 | |
| | | | | | | | 1,854.89 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| DaSilva, Nicole | | - | | | | | 271.13 | |
| | | | | | | | 514.13 | 243.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Davis, James | | - | | | | | 290.70 | |
| | | | | | | | 290.70 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Davis, John | | - | | | | | 11,549.76 | |
| | | | | | | | 11,549.76 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Deaveiro, Laura | | - | | | | | 2,467.04 | |
| | | | | | | | 2,467.04 | 0.00 |
| Subtotal | | | | | | | 16,676.52 | 16,433.52 |
| (Total of this page) | | | | | | | 16,676.52 | 243.00 |

Sheet 18 of 91 continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

In re Long Beach Medical CenterCase No. 14-70593

Debtor

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS (Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

| CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.) | C O D E D E B T O R | H U S B A N D , W I F E , J O I N T , O R C O M M U N I T Y | D A T E C L A I M W A S I N C U R R E D A N D C O N S I D E R A T I O N F O R C L A I M | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | A M O U N T O F C L A I M | AMOUNT NOT ENTITLED TO PRIORITY, IF ANY |
|---|--|--|--|--|--|--------------------------------------|---|---|
| | | | | | | | | AMOUNT ENTITLED TO PRIORITY |
| Account No. | | | 2/18/2014 | | | | | |
| Defilippo, Diane | | - | | | | | 3,834.26 | |
| | | | | | | | 3,834.26 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Delacruz, Jose | | - | | | | | 1,712.17 | |
| | | | | | | | 1,712.17 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Dervil, Melissa | | - | | | | | 362.10 | |
| | | | | | | | 362.10 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Devera, Teresita | | - | | | | | 3,157.95 | |
| | | | | | | | 3,157.95 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| DIAZ, ALFREDO | | - | | | | | 599.63 | |
| | | | | | | | 599.63 | 0.00 |
| Subtotal | | | | | | | 9,666.11 | |
| (Total of this page) | | | | | | | 9,666.11 | 0.00 |

Sheet **19** of **91** continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

B6E (Official Form 6E) (4/13) - Cont.

In re **Long Beach Medical Center**Case No. **14-70593**

Debtor

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS (Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

| CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.) | C O D E B T O R | H W J C | Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM | AMOUNT NOT ENTITLED TO PRIORITY, IF ANY |
|---|--------------------------------------|------------------|--|--|--|--------------------------------------|--------------------|---|
| | | | | | | | | AMOUNT ENTITLED TO PRIORITY |
| Account No. | | | 2/18/2014 | | | | | |
| Dickinson, Denise | | - | | | | | 1,953.17 | |
| | | | | | | | 1,953.17 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Difonzo, Denise | | - | | | | | 1,513.64 | |
| | | | | | | | 1,513.64 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Difusco, Phyllis | | - | | | | | 5,613.83 | |
| | | | | | | | 5,613.83 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Dingle, Sara | | - | | | | | 407.80 | |
| | | | | | | | 407.80 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Disilvestre, John | | - | | | | | 1,762.90 | |
| | | | | | | | 1,762.90 | 0.00 |
| Subtotal | | | | | | | 11,251.34 | |
| (Total of this page) | | | | | | | 11,251.34 | 0.00 |

Sheet **20** of **91** continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

Subtotal
(Total of this page)

B6E (Official Form 6E) (4/13) - Cont.

In re Long Beach Medical CenterCase No. 14-70593

Debtor

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS (Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

| CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.) | C O D E B T O R | H U S B A N D, W I F E, J O I N T, O R C O M M U N I T Y | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM | AMOUNT NOT ENTITLED TO PRIORITY, IF ANY |
|---|--------------------------------------|--|--|--|--|--------------------------------------|--------------------|---|
| | | | | | | | | AMOUNT ENTITLED TO PRIORITY |
| Account No. | | | 2/18/2014 | | | | | |
| Domena, Jose | | | | | | | | 1,936.71 |
| | | | | | | | 3,086.91 | 1,150.20 |
| Account No. | | | 2/18/2014 | | | | | |
| Donato, Marilou | | | | | | | | 0.00 |
| | | | | | | | 0.00 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Donato, Patricia | | | | | | | | 1,278.68 |
| | | | | | | | 1,278.68 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Duda, Philomena | | | | | | | | 9,505.00 |
| | | | | | | | 15,805.00 | 6,300.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Dupont, Immacula | | | | | | | | 2,770.84 |
| | | | | | | | 2,770.84 | 0.00 |
| Subtotal | | | | | | | | 15,491.23 |
| (Total of this page) | | | | | | | 22,941.43 | 7,450.20 |

Sheet 21 of 91 continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

B6E (Official Form 6E) (4/13) - Cont.

In re **Long Beach Medical Center**Case No. **14-70593**

Debtor

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS (Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

| CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.) | C O D E B O R R | H W J C | Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM | AMOUNT NOT ENTITLED TO PRIORITY, IF ANY |
|---|--------------------------------------|------------------|--|--|--|--------------------------------------|--------------------|---|
| | | | | | | | | AMOUNT ENTITLED TO PRIORITY |
| Account No. | | | 2/18/2014 | | | | | |
| Durisle Jr., Pierre Charles | | - | | | | | 301.95 | |
| | | | | | | | 301.95 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Duverger, Cyntia | | - | | | | | 260.51 | |
| | | | | | | | 260.51 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Eblen-Platt, Patricia | | - | | | | | 368.65 | |
| | | | | | | | 368.65 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Eschmann, Kathryn | | - | | | | | 530.19 | |
| | | | | | | | 530.19 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Eskenazi, Pamela | | - | | | | | 4,054.46 | |
| | | | | | | | 4,054.46 | 0.00 |
| Subtotal (Total of this page) | | | | | | | 5,515.76 | 0.00 |

Sheet **22** of **91** continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

B6E (Official Form 6E) (4/13) - Cont.

In re **Long Beach Medical Center**Case No. **14-70593**

Debtor

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS (Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

| CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.) | C O D E B O R R | H U S B A N D W I F E J O I N T C O M M U N I T Y | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM | AMOUNT NOT ENTITLED TO PRIORITY, IF ANY |
|---|--------------------------------------|---|--|--|--|--------------------------------------|--------------------|---|
| | | | | | | | | AMOUNT ENTITLED TO PRIORITY |
| Account No. | | | 2/18/2014 | | | | | |
| Estanis, Josette | | | | | | | | 1,801.98 |
| | | | | | | | 1,801.98 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Evans-Bartley, Paulette | | | | | | | | 40.47 |
| | | | | | | | 40.47 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Fabrizio, Mathew | | | | | | | | 2,009.50 |
| | | | | | | | 2,874.70 | 865.20 |
| Account No. | | | 2/18/2014 | | | | | |
| Fenech, Suzanne | | | | | | | | 95.05 |
| | | | | | | | 95.05 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Ferdinand, Rachel | | | | | | | | 3,920.06 |
| | | | | | | | 3,920.06 | 0.00 |
| Subtotal | | | | | | | | 7,867.06 |
| (Total of this page) | | | | | | | 8,732.26 | 865.20 |

Sheet **23** of **91** continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

In re Long Beach Medical CenterCase No. 14-70593

Debtor

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS (Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

| CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.) | C O D E B O R | H W J C | Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM | AMOUNT NOT ENTITLED TO PRIORITY, IF ANY |
|---|---------------------------------|------------------|--|--|--|--------------------------------------|--------------------|---|
| | | | | | | | | AMOUNT ENTITLED TO PRIORITY |
| Account No. | | | 2/18/2014 | | | | | |
| Ferdman, Natalya | | - | | | | | 4,837.88 | |
| | | | | | | | 4,837.88 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Ferdschneider, Arthur | | - | | | | | 528.31 | |
| | | | | | | | 528.31 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Ferrante, Tara | | - | | | | | 1,797.55 | |
| | | | | | | | 1,797.55 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Finch, Nichole | | - | | | | | 4,378.35 | |
| | | | | | | | 4,378.35 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Fleishman, Paul | | - | | | | | 1,091.80 | |
| | | | | | | | 1,091.80 | 0.00 |
| Subtotal | | | | | | | 12,633.89 | |
| (Total of this page) | | | | | | | 12,633.89 | 0.00 |

Sheet 24 of 91 continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

B6E (Official Form 6E) (4/13) - Cont.

In re Long Beach Medical CenterCase No. 14-70593

Debtor

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS (Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

| CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.) | C O D E D E B T O R | H W J C | Husband, Wife, Joint, or Community | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM | AMOUNT NOT ENTITLED TO PRIORITY, IF ANY |
|---|--|------------------|------------------------------------|--|--|--------------------------------------|--------------------|---|
| | | | | | | | | AMOUNT ENTITLED TO PRIORITY |
| Account No. | | | 2/18/2014 | | | | | |
| Flores, Alberto | | | | | | | 280.32 | |
| | | | | | | | 280.32 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Flores, Carla | | | | | | | 315.61 | |
| | | | | | | | 315.61 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Foley, Lois Taylor | | | | | | | 3,460.70 | |
| | | | | | | | 3,460.70 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Forte, Kimberly | | | | | | | 1,011.57 | |
| | | | | | | | 1,011.57 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| FOSKIN, ANNA | | | | | | | 3,872.23 | |
| | | | | | | | 3,872.23 | 0.00 |
| Subtotal | | | | | | | 8,940.43 | |
| (Total of this page) | | | | | | | 8,940.43 | 0.00 |

Sheet 25 of 91 continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

B6E (Official Form 6E) (4/13) - Cont.

In re **Long Beach Medical Center**Case No. **14-70593**

Debtor

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS (Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

| CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.) | C O D E B O R R | H W J C | Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM | C O N T I N G E N T | U N L I Q U I T E D | D I S P U T E D | AMOUNT OF CLAIM | AMOUNT NOT ENTITLED TO PRIORITY, IF ANY |
|---|--------------------------------------|------------------|--|--|--|--------------------------------------|--------------------|---|
| | | | | | | | | AMOUNT ENTITLED TO PRIORITY |
| Account No. | | | 2/18/2014 | | | | | |
| Fraktas, Inna | | - | | | | | 1,321.70 | |
| | | | | | | | 1,321.70 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Fraktas, Jack | | - | | | | | 3,813.91 | |
| | | | | | | | 3,813.91 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Francis, Robert | | - | | | | | 11,437.58 | |
| | | | | | | | 12,956.78 | 1,519.20 |
| Account No. | | | 2/18/2014 | | | | | |
| Franzese, Therese | | - | | | | | 321.43 | |
| | | | | | | | 321.43 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| FRIEDMAN, ARLENE | | - | | | | | 345.40 | |
| | | | | | | | 345.40 | 0.00 |
| Subtotal | | | | | | | 17,240.02 | |
| (Total of this page) | | | | | | | 18,759.22 | 1,519.20 |

 Sheet **26** of **91** continuation sheets attached to
 Schedule of Creditors Holding Unsecured Priority Claims

B6E (Official Form 6E) (4/13) - Cont.

In re **Long Beach Medical Center**Case No. **14-70593**

Debtor

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS (Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

| CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.) | C O D E B O R R | H W J C | Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM | AMOUNT NOT ENTITLED TO PRIORITY, IF ANY |
|---|--------------------------------------|------------------|--|--|--|--------------------------------------|--------------------|---|
| | | | | | | | | AMOUNT ENTITLED TO PRIORITY |
| Account No. | | | 2/18/2014 | | | | | |
| Gabriel, Erika | | - | | | | | 499.05 | |
| | | | | | | | 499.05 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Galgano, Alicia | | - | | | | | 1,080.20 | |
| | | | | | | | 1,080.20 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Garcia, Emelita | | - | | | | | 6,933.98 | |
| | | | | | | | 6,933.98 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Garibaldi, Nicole | | - | | | | | 102.90 | |
| | | | | | | | 102.90 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Garrett, Victoria | | - | | | | | 110.48 | |
| | | | | | | | 110.48 | 0.00 |
| Subtotal | | | | | | | 8,726.61 | |
| (Total of this page) | | | | | | | 8,726.61 | 0.00 |

 Sheet **27** of **91** continuation sheets attached to
 Schedule of Creditors Holding Unsecured Priority Claims

In re Long Beach Medical CenterCase No. 14-70593

Debtor

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS (Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

| CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.) | C O D E D E B I T O R | H W J C | Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM | AMOUNT NOT ENTITLED TO PRIORITY, IF ANY |
|---|---|------------------|--|--|--|--------------------------------------|--------------------|---|
| | | | | | | | | AMOUNT ENTITLED TO PRIORITY |
| Account No. | | | 2/18/2014 | | | | | |
| Gaudin, Ketty | | - | | | | | 2,066.59 | |
| | | | | | | | 2,066.59 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Geiger, Jennifer | | - | | | | | 3,743.48 | |
| | | | | | | | 3,743.48 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Gelfand Md, Matthew | | - | | | | | 5,512.33 | |
| | | | | | | | 5,512.33 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Gelin, Natanya | | - | | | | | 361.78 | |
| | | | | | | | 361.78 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| GENOVA, PETER L | | - | | | | | 9,807.62 | |
| | | | | | | | 9,807.62 | 0.00 |
| Subtotal (Total of this page) | | | | | | | 21,491.80 | 0.00 |

Sheet 28 of 91 continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

In re Long Beach Medical CenterCase No. 14-70593

Debtor

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS (Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

| CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.) | C O D E B O R R | H W J C | Husband, Wife, Joint, or Community | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM | AMOUNT NOT ENTITLED TO PRIORITY, IF ANY |
|---|--------------------------------------|------------------|------------------------------------|--|--|--------------------------------------|--------------------|---|
| | | | | | | | | AMOUNT ENTITLED TO PRIORITY |
| Account No. | | | 2/18/2014 | | | | | |
| George, Chithanna | | - | | | | | 6,253.78 | |
| | | | | | | | 6,253.78 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| George, Miriam | | - | | | | | 3,298.97 | |
| | | | | | | | 3,298.97 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Geremina, Joanne | | - | | | | | 2,244.92 | |
| | | | | | | | 2,244.92 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Giannetti, Lamara | | - | | | | | 4,300.20 | |
| | | | | | | | 4,300.20 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Gigante, Vicki | | - | | | | | 843.09 | |
| | | | | | | | 843.09 | 0.00 |
| Subtotal | | | | | | | 16,940.96 | 0.00 |
| (Total of this page) | | | | | | | 16,940.96 | 0.00 |

Sheet 29 of 91 continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

In re Long Beach Medical CenterCase No. 14-70593

Debtor

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS (Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

| CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.) | C O D E B O R R | H W J C | Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM | AMOUNT NOT ENTITLED TO PRIORITY, IF ANY |
|---|--------------------------------------|------------------|--|--|--|--------------------------------------|--------------------|---|
| | | | | | | | | AMOUNT ENTITLED TO PRIORITY |
| Account No. | | | 2/18/2014 | | | | | |
| Girdey, Aldene | | - | | | | | 4,778.49 | |
| | | | | | | | 4,778.49 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Gleeson Carr, Mary | | - | | | | | 5,214.13 | |
| | | | | | | | 5,214.13 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Glenn, Murrene | | - | | | | | 897.75 | |
| | | | | | | | 897.75 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Gonzales, Adrianne | | - | | | | | 2,371.50 | |
| | | | | | | | 2,371.50 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| GONZALES, GONZALO | | - | | | | | 4,118.04 | |
| | | | | | | | 4,118.04 | 0.00 |
| Subtotal | | | | | | | 17,379.91 | 0.00 |
| (Total of this page) | | | | | | | 17,379.91 | 0.00 |

Sheet 30 of 91 continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

B6E (Official Form 6E) (4/13) - Cont.

In re **Long Beach Medical Center**Case No. **14-70593**

Debtor

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS (Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

| CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.) | C O D E B O R | H W J C | Husband, Wife, Joint, or Community | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM | AMOUNT NOT ENTITLED TO PRIORITY, IF ANY |
|---|---------------------------------|------------------|------------------------------------|--|--|--------------------------------------|--------------------|---|
| | | | | | | | | AMOUNT ENTITLED TO PRIORITY |
| Account No. | | | 2/18/2014 | | | | | |
| Gonzalez, Aida | | - | | | | | 1,326.50 | |
| | | | | | | | 1,326.50 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Goodheart, Laurie M | | - | | | | | 1,152.43 | |
| | | | | | | | 1,152.43 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Goodrich, Ann | | - | | | | | 2,175.92 | |
| | | | | | | | 2,175.92 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Goodridge, Margareta | | - | | | | | 2,174.69 | |
| | | | | | | | 2,174.69 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Graham, Neesha | | - | | | | | 265.88 | |
| | | | | | | | 265.88 | 0.00 |
| Subtotal | | | | | | | 7,095.42 | |
| (Total of this page) | | | | | | | 7,095.42 | 0.00 |

Sheet **31** of **91** continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

In re **Long Beach Medical Center**Case No. **14-70593**

Debtor

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS (Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

| CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.) | C O D E B O R R | H W J C | Husband, Wife, Joint, or Community | D I S P U T E D | U N L I Q U I D A T E D | C O N T I N G E N T | AMOUNT OF CLAIM | AMOUNT NOT ENTITLED TO PRIORITY, IF ANY |
|---|--------------------------------------|------------------|------------------------------------|--------------------------------------|--|--|--------------------|---|
| | | | | | | | | AMOUNT ENTITLED TO PRIORITY |
| Account No. | | | 2/18/2014 | | | | | |
| Grandy Akins, Brenda | | - | | | | | 7,428.58 | |
| | | | | | | | 7,428.58 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Grant, Dolores | | - | | | | | 3,368.35 | |
| | | | | | | | 3,368.35 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Grassi, Gina | | - | | | | | 321.13 | |
| | | | | | | | 321.13 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Green, Ann Marie | | - | | | | | 571.81 | |
| | | | | | | | 571.81 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| GREENFIELD, MARNIE | | - | | | | | 9,466.37 | |
| | | | | | | | 12,109.67 | 2,643.30 |
| Subtotal | | | | | | | 23,799.54 | 21,156.24 |
| (Total of this page) | | | | | | | 23,799.54 | 2,643.30 |

Sheet **32** of **91** continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

In re **Long Beach Medical Center**

Case No. 14-70593

Debtor

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS
(Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

| CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.) | C O D E B O R | H U S B A N D W I F E J O I N T O R C O M M U N I T Y | Husband, Wife, Joint, or Community | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM | AMOUNT NOT ENTITLED TO PRIORITY, IF ANY |
|---|---------------------------------|---|------------------------------------|--|--|--------------------------------------|--------------------|---|
| | | | | | | | | AMOUNT ENTITLED TO PRIORITY |
| Account No. | | | 2/18/2014 | | | | | |
| Gregoire, Guerdy | | - | | | | | 8,360.28 | 8,360.28 |
| | | | | | | | | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Grey, Gilbert R | | - | | | | | 2,270.10 | 2,270.10 |
| | | | | | | | | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Griffith, Lustrie | | - | | | | | 111.75 | 111.75 |
| | | | | | | | | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Grivas, Linda | | - | | | | | 10,911.68 | 10,911.68 |
| | | | | | | | | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Guarin, Cristina | | - | | | | | 2,031.47 | 2,031.47 |
| | | | | | | | | 0.00 |
| Subtotal | | | | | | | 23,685.28 | 23,685.28 |
| (Total of this page) | | | | | | | | 0.00 |

Sheet 33 of 91 continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

Subtotal
(Total of this page)

23,685.28
0.00

B6E (Official Form 6E) (4/13) - Cont.

In re **Long Beach Medical Center**Case No. **14-70593**

Debtor

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS (Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

| CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.) | C O D E B O R | H U S B A N D, W I F E, J O I N T, O R C O M M U N I T Y | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM | AMOUNT NOT ENTITLED TO PRIORITY, IF ANY |
|---|---------------------------------|--|--|--|--|--------------------------------------|--------------------|---|
| | | | | | | | | AMOUNT ENTITLED TO PRIORITY |
| Account No. | | | 2/18/2014 | | | | | |
| Guerrero, Luis | | - | | | | | 4,188.86 | 2,813.66 |
| | | | | | | | | 1,375.20 |
| Account No. | | | 2/18/2014 | | | | | |
| Guirand, Patricia | | - | | | | | 120.30 | 120.30 |
| | | | | | | | 120.30 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| HAAS, ELIZABETH | | - | | | | | 1,740.89 | 895.01 |
| | | | | | | | | 845.88 |
| Account No. | | | 2/18/2014 | | | | | |
| Hall, Nicole | | - | | | | | 104.32 | 104.32 |
| | | | | | | | 104.32 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Hamlin, Aretha | | - | | | | | 7,826.96 | 7,826.96 |
| | | | | | | | 7,826.96 | 0.00 |
| Subtotal | | | | | | | 13,981.33 | 11,760.25 |
| (Total of this page) | | | | | | | 13,981.33 | 2,221.08 |

Sheet **34** of **91** continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

In re **Long Beach Medical Center**Case No. **14-70593**

Debtor

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS (Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

| CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.) | C O D E B O R R | H U S B A N D W I F E J O I N T O R C O M M U N I T Y | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM | AMOUNT NOT ENTITLED TO PRIORITY, IF ANY |
|---|--------------------------------------|---|--|--|--|--------------------------------------|--------------------|---|
| | | | | | | | | AMOUNT ENTITLED TO PRIORITY |
| Account No. | | | 2/18/2014 | | | | | |
| Han, Jun-Sin | | - | | | | | 9,142.52 | |
| | | | | | | | 9,142.52 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Hargrave, Kayron | | - | | | | | 6.15 | |
| | | | | | | | 6.15 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Harrison, Jennifer | | - | | | | | 102.90 | |
| | | | | | | | 102.90 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Hassler, Debra A | | - | | | | | 539.10 | |
| | | | | | | | 539.10 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| HAYES, DANIEL | | - | | | | | 8,968.38 | |
| | | | | | | | 12,013.98 | 3,045.60 |
| Subtotal | | | | | | | 21,804.65 | 18,759.05 |
| (Total of this page) | | | | | | | 21,804.65 | 3,045.60 |

Sheet **35** of **91** continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

In re Long Beach Medical CenterCase No. 14-70593

Debtor

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS (Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

| CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.) | C O D E D E B T O R | H W J C | Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM | C O N T I N G E N T | U N L I Q U I T E D | D I S P U T E D | AMOUNT OF CLAIM | AMOUNT NOT ENTITLED TO PRIORITY, IF ANY |
|---|--|------------------|--|--|--|--------------------------------------|--------------------|---|
| | | | | | | | | AMOUNT ENTITLED TO PRIORITY |
| Account No. | | | 2/18/2014 | | | | | |
| HAYNES, LUCILE | | | | | | | | 117.97 |
| | | - | | | | | 228.45 | 110.48 |
| Account No. | | | 2/18/2014 | | | | | |
| HEALEY, MARK A. | | | | | | | | 14,452.20 |
| | | - | | | | | 14,452.20 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Heaney, Trina | | | | | | | | 462.59 |
| | | - | | | | | 462.59 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Heredia, Debbie | | | | | | | | 97.72 |
| | | - | | | | | 97.72 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Hernandez, Dania M. | | | | | | | | 1,980.55 |
| | | - | | | | | 1,980.55 | 0.00 |
| Subtotal | | | | | | | | 17,111.03 |
| (Total of this page) | | | | | | | 17,221.51 | 110.48 |

Sheet 36 of 91 continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

B6E (Official Form 6E) (4/13) - Cont.

In re Long Beach Medical CenterCase No. 14-70593

Debtor

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS (Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

| CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.) | C O D E D E B T O R | H W J C | Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM | AMOUNT NOT ENTITLED TO PRIORITY, IF ANY |
|---|--|------------------|--|--|--|--------------------------------------|--------------------|---|
| | | | | | | | | AMOUNT ENTITLED TO PRIORITY |
| Account No. | | | 2/18/2014 | | | | | |
| Heuvel, Joseph | | - | | | | | 862.05 | |
| | | | | | | | 862.05 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Hirschheimer-Breslow, Mandy | | - | | | | | 1,319.80 | |
| | | | | | | | 1,319.80 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Howell, Jacqueline | | - | | | | | 1,062.57 | |
| | | | | | | | 2,052.52 | 989.95 |
| Account No. | | | 2/18/2014 | | | | | |
| Hunt, Richard J | | - | | | | | 3,429.39 | |
| | | | | | | | 3,429.39 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Iannece, Julie | | - | | | | | 7,255.94 | |
| | | | | | | | 7,255.94 | 0.00 |
| Subtotal | | | | | | | 14,919.70 | 13,929.75 |
| (Total of this page) | | | | | | | 14,919.70 | 989.95 |

Sheet 37 of 91 continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

B6E (Official Form 6E) (4/13) - Cont.

In re **Long Beach Medical Center**Case No. **14-70593**

Debtor

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS (Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

| CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.) | C O D E B T O R | H W J C | Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM | AMOUNT NOT ENTITLED TO PRIORITY, IF ANY |
|---|--------------------------------------|------------------|--|--|--|--------------------------------------|--------------------|---|
| | | | | | | | | AMOUNT ENTITLED TO PRIORITY |
| Account No. | | | 2/18/2014 | | | | | |
| Jackson, Deborah A | - | | | | | | 5,350.48 | |
| | | | | | | | 5,350.48 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Jackson, Ethel | - | | | | | | 14,076.70 | |
| | | | | | | | 14,076.70 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Jacob, Alphonse | - | | | | | | 1,454.65 | |
| | | | | | | | 1,454.65 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Jacobs, Marian M | - | | | | | | 8,316.18 | |
| | | | | | | | 8,316.18 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Jaikaran, Bhagmattie | - | | | | | | 559.99 | |
| | | | | | | | 559.99 | 0.00 |
| Subtotal | | | | | | | 29,758.00 | 0.00 |
| (Total of this page) | | | | | | | 29,758.00 | 0.00 |

Sheet **38** of **91** continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

B6E (Official Form 6E) (4/13) - Cont.

In re **Long Beach Medical Center**Case No. **14-70593**

Debtor

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS (Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

| CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.) | C O D E D E B T O R | H W J C | Husband, Wife, Joint, or Community | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM | AMOUNT NOT ENTITLED TO PRIORITY, IF ANY |
|---|--|------------------|------------------------------------|--|--|--|--------------------------------------|--------------------|---|
| | | | | | | | | | AMOUNT ENTITLED TO PRIORITY |
| Account No. | | | | 2/18/2014 | | | | | |
| Jaque, Carmen E. | | | | | | | | 1,552.32 | |
| | | | | | | | | 1,552.32 | 0.00 |
| Account No. | | | | 2/18/2014 | | | | | |
| Jean-Jacques, Marie | | | | | | | | 4,042.29 | |
| | | | | | | | | 4,042.29 | 0.00 |
| Account No. | | | | 2/18/2014 | | | | | |
| Jeanlubin, Ingret | | | | | | | | 1,587.33 | |
| | | | | | | | | 1,587.33 | 0.00 |
| Account No. | | | | 2/18/2014 | | | | | |
| Jennings, Necola | | | | | | | | 2,607.47 | |
| | | | | | | | | 2,607.47 | 0.00 |
| Account No. | | | | 2/18/2014 | | | | | |
| Jermann, Joann | | | | | | | | 7,826.22 | |
| | | | | | | | | 7,826.22 | 0.00 |
| Subtotal | | | | | | | | 17,615.63 | |
| (Total of this page) | | | | | | | | 17,615.63 | 0.00 |

Sheet **39** of **91** continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

In re Long Beach Medical CenterCase No. 14-70593

Debtor

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS (Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

| CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.) | C O D E D E B T O R | H W J C | Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM | AMOUNT NOT ENTITLED TO PRIORITY, IF ANY |
|---|--|------------------|--|--|--|--------------------------------------|--------------------|---|
| | | | | | | | | AMOUNT ENTITLED TO PRIORITY |
| Account No. | | | 2/18/2014 | | | | | |
| Jerome, Gerda | | - | | | | | 2,747.97 | |
| | | | | | | | 2,747.97 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| John-Baptiste, Clayton | | - | | | | | 7,605.84 | |
| | | | | | | | 7,605.84 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Johnson, Glenda | | - | | | | | 287.64 | |
| | | | | | | | 546.78 | 259.14 |
| Account No. | | | 2/18/2014 | | | | | |
| Johnson, Joseph | | - | | | | | 1,193.28 | |
| | | | | | | | 1,193.28 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Jones, Anthony | | - | | | | | 258.94 | |
| | | | | | | | 258.94 | 0.00 |
| Subtotal (Total of this page) | | | | | | | 12,352.81 | 12,093.67 259.14 |

Sheet 40 of 91 continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

In re Long Beach Medical CenterCase No. 14-70593

Debtor

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS (Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

| CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.) | C O D E B E N E F I T A R Y | H U S B A N D W I F E J O I N T O R C O M M U N I T Y | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM | AMOUNT NOT ENTITLED TO PRIORITY, IF ANY |
|---|--|---|--|--|--|--------------------------------------|--------------------|---|
| | | | | | | | | AMOUNT ENTITLED TO PRIORITY |
| Account No. | | | 2/18/2014 | | | | | |
| Joseph, Anniamma | | - | | | | | 1,087.94 | |
| | | | | | | | 1,087.94 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Joyner, Estella I | | - | | | | | 1,709.49 | |
| | | | | | | | 1,709.49 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Juliano, Dolores Marie | | - | | | | | 1,256.52 | |
| | | | | | | | 1,256.52 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Kapen, Toni | | - | | | | | 1,215.45 | |
| | | | | | | | 1,215.45 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Karmel, Jennifer | | - | | | | | 1,570.64 | |
| | | | | | | | 1,570.64 | 0.00 |
| Subtotal | | | | | | | 6,840.04 | 6,840.04 |
| (Total of this page) | | | | | | | 6,840.04 | 0.00 |

Sheet 41 of 91 continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

In re Long Beach Medical CenterCase No. 14-70593

Debtor

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS (Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

| CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.) | C O D E B O R R | H W J C | Husband, Wife, Joint, or Community | D A T E C L A I M W A S I N C U R R E D A N D C O N S I D E R A T I O N F O R C L A I M | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM | AMOUNT NOT ENTITLED TO PRIORITY, IF ANY |
|---|--------------------------------------|------------------|------------------------------------|--|--|--|--------------------------------------|--------------------|---|
| | | | | | | | | | AMOUNT ENTITLED TO PRIORITY |
| Account No. | | | | 2/18/2014 | | | | | |
| Kaval, William | | - | | | | | | 2,853.29 | 1,459.37 |
| | | | | | | | | | 1,393.92 |
| Account No. | | | | 2/18/2014 | | | | | |
| Kenn, Mary C | | - | | | | | | 12,632.87 | 12,632.87 |
| | | | | | | | | 12,632.87 | 0.00 |
| Account No. | | | | 2/18/2014 | | | | | |
| Kerr, Gary T | | - | | | | | | 4,478.93 | 4,478.93 |
| | | | | | | | | 4,478.93 | 0.00 |
| Account No. | | | | 2/18/2014 | | | | | |
| Khan, Ishrat | | - | | | | | | 4,306.39 | 4,306.39 |
| | | | | | | | | 4,306.39 | 0.00 |
| Account No. | | | | 2/18/2014 | | | | | |
| Kisheyev, Ludmila | | - | | | | | | 464.69 | 464.69 |
| | | | | | | | | 464.69 | 0.00 |
| Subtotal | | | | | | | | 24,736.17 | 23,342.25 |
| (Total of this page) | | | | | | | | 24,736.17 | 1,393.92 |

Sheet 42 of 91 continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

B6E (Official Form 6E) (4/13) - Cont.

In re **Long Beach Medical Center**Case No. **14-70593**

Debtor

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS (Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

| CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.) | C O D E B O R R | H W J C | Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM | C O N T I N G E N T | U N L I Q U I T E D | D I S P U T E D | AMOUNT OF CLAIM | AMOUNT NOT ENTITLED TO PRIORITY, IF ANY |
|---|--------------------------------------|------------------|--|--|--|--------------------------------------|--------------------|---|
| | | | | | | | | AMOUNT ENTITLED TO PRIORITY |
| Account No. | | | 2/18/2014 | | | | | |
| Klausner, Sandy | | - | | | | | 1,075.50 | |
| | | | | | | | 1,075.50 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Kosiner, Linda | | - | | | | | 590.22 | |
| | | | | | | | 590.22 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Kratina, Barbara L. | | - | | | | | 6,256.99 | |
| | | | | | | | 6,256.99 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Krauss, Robert | | - | | | | | 19,140.42 | |
| | | | | | | | 23,276.82 | 4,136.40 |
| Account No. | | | 2/18/2014 | | | | | |
| Krumholz, Ronald | | - | | | | | 3,814.70 | |
| | | | | | | | 3,814.70 | 0.00 |
| Subtotal | | | | | | | 30,877.83 | |
| (Total of this page) | | | | | | | 35,014.23 | 4,136.40 |

 Sheet **43** of **91** continuation sheets attached to
 Schedule of Creditors Holding Unsecured Priority Claims

B6E (Official Form 6E) (4/13) - Cont.

In re **Long Beach Medical Center**Case No. **14-70593**

Debtor

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS (Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

| CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.) | C O D E B O R R | H W J C | Husband, Wife, Joint, or Community | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM | AMOUNT NOT ENTITLED TO PRIORITY, IF ANY |
|---|--------------------------------------|------------------|------------------------------------|--|--|--------------------------------------|--------------------|---|
| | | | | | | | | AMOUNT ENTITLED TO PRIORITY |
| Account No. | | | 2/18/2014 | | | | | |
| Labissiere, Marie | | - | | | | | 102.90 | |
| | | | | | | | 102.90 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Labossiere, Jocelyne | | - | | | | | 178.02 | |
| | | | | | | | 178.02 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Lang, Wendy | | - | | | | | 6,930.74 | |
| | | | | | | | 10,322.84 | 3,392.10 |
| Account No. | | | 2/18/2014 | | | | | |
| Lapenna, Barbara | | - | | | | | 3,477.56 | |
| | | | | | | | 3,477.56 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Leas, Emelyne | | - | | | | | 2,577.89 | |
| | | | | | | | 2,577.89 | 0.00 |
| Subtotal | | | | | | | 16,659.21 | 13,267.11 |
| (Total of this page) | | | | | | | 16,659.21 | 3,392.10 |

Sheet **44** of **91** continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

In re Long Beach Medical CenterCase No. 14-70593

Debtor

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS (Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

| CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.) | C O D E D E B I T O R | H U S B A N D , W I F E , J O I N T , O R C O M M U N I T Y | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM | AMOUNT NOT ENTITLED TO PRIORITY, IF ANY |
|---|---|--|--|--|--|--------------------------------------|--------------------|---|
| | | | | | | | | AMOUNT ENTITLED TO PRIORITY |
| Account No. | | | 2/18/2014 | | | | | |
| LeBow, Eliot | | - | | | | | 238.40 | |
| | | | | | | | 238.40 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Lebowitz, Ruth | | - | | | | | 181.73 | |
| | | | | | | | 181.73 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Lee, Dalwoo | | - | | | | | 921.70 | |
| | | | | | | | 921.70 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| LEE, SOO-IL | | - | | | | | 2,595.42 | |
| | | | | | | | 5,020.02 | 2,424.60 |
| Account No. | | | 2/18/2014 | | | | | |
| LEUTRITZ, MARILYN | | - | | | | | 8,684.66 | |
| | | | | | | | 8,684.66 | 0.00 |
| Subtotal | | | | | | | 15,046.51 | 12,621.91 |
| (Total of this page) | | | | | | | | 2,424.60 |

Sheet 45 of 91 continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

B6E (Official Form 6E) (4/13) - Cont.

In re **Long Beach Medical Center**Case No. **14-70593**

Debtor

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS (Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

| CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.) | C O D E B O R R | H U S B A N D W I F E J O I N T O R C O M M U N I T Y | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM | AMOUNT NOT ENTITLED TO PRIORITY, IF ANY |
|---|--------------------------------------|---|--|--|--|--------------------------------------|--------------------|---|
| | | | | | | | | AMOUNT ENTITLED TO PRIORITY |
| Account No. | | | 2/18/2014 | | | | | |
| Levinson, Rachela | | - | | | | | 115.71 | |
| | | | | | | | 115.71 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Libsman, Karen | | - | | | | | 97.79 | |
| | | | | | | | 97.79 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Lindwall, Joann | | - | | | | | 819.42 | |
| | | | | | | | 1,596.84 | 777.42 |
| Account No. | | | 2/18/2014 | | | | | |
| Linzer, Irene F | | - | | | | | 8,966.20 | |
| | | | | | | | 8,966.20 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Lo, Yow-Yann | | - | | | | | 24,690.33 | |
| | | | | | | | 24,690.33 | 0.00 |
| Subtotal | | | | | | | 35,466.87 | 34,689.45 |
| (Total of this page) | | | | | | | | 777.42 |

Sheet **46** of **91** continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

In re **Long Beach Medical Center**Case No. **14-70593**

Debtor

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS (Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

| CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.) | C O D E B O R R | H W J C | Husband, Wife, Joint, or Community | D A T E C L A I M W A S I N C U R R E D A N D C O N S I D E R A T I O N F O R C L A I M | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM | AMOUNT NOT ENTITLED TO PRIORITY, IF ANY | |
|---|--------------------------------------|------------------|------------------------------------|--|--|--|--------------------------------------|--------------------|---|----------|
| | | | | | | | | | AMOUNT ENTITLED TO PRIORITY | |
| Account No. | | | | 2/18/2014 | | | | | | |
| LoBrutto, Patricia | | - | | | | | | | 182.27 | |
| | | | | | | | | 182.27 | | 0.00 |
| Account No. | | | | 2/18/2014 | | | | | | |
| Lopez, Juan | | - | | | | | | | 45.75 | |
| | | | | | | | | 45.75 | | 0.00 |
| Account No. | | | | 2/18/2014 | | | | | | |
| Lopez-Cruz, Julio | | - | | | | | | | 2,857.50 | |
| | | | | | | | | 3,964.50 | | 1,107.00 |
| Account No. | | | | 2/18/2014 | | | | | | |
| Lucas, Jenna | | - | | | | | | | 1,076.71 | |
| | | | | | | | | 1,076.71 | | 0.00 |
| Account No. | | | | 2/18/2014 | | | | | | |
| Luisi, Christine | | - | | | | | | | 2,800.31 | |
| | | | | | | | | 2,800.31 | | 0.00 |
| Subtotal | | | | | | | | | 6,962.54 | |
| (Total of this page) | | | | | | | | 8,069.54 | | 1,107.00 |

Sheet **47** of **91** continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

In re **Long Beach Medical Center**Case No. **14-70593**

Debtor

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS (Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

| CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.) | C O D E B O R R | H W J C | Husband, Wife, Joint, or Community | D A T E C L A I M W A S I N C U R R E D A N D C O N S I D E R A T I O N F O R C L A I M | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM | AMOUNT NOT ENTITLED TO PRIORITY, IF ANY |
|---|--------------------------------------|------------------|------------------------------------|--|--|--|--------------------------------------|--------------------|---|
| | | | | | | | | | AMOUNT ENTITLED TO PRIORITY |
| Account No. | | | | 2/18/2014 | | | | | |
| MACLEAN, DONALD | | | | | | | | 472.82 | |
| | | | | | | | | 472.82 | 0.00 |
| Account No. | | | | 2/18/2014 | | | | | |
| Magalong, John | | | | | | | | 14,825.53 | |
| | | | | | | | | 14,825.53 | 0.00 |
| Account No. | | | | 2/18/2014 | | | | | |
| Mahan, Dorothy | | | | | | | | 3,110.67 | |
| | | | | | | | | 3,110.67 | 0.00 |
| Account No. | | | | 2/18/2014 | | | | | |
| Mangan, Margaret C. | | | | | | | | 10,191.05 | |
| | | | | | | | | 10,191.05 | 0.00 |
| Account No. | | | | 2/18/2014 | | | | | |
| Manolaki, Evangelia | | | | | | | | 891.54 | |
| | | | | | | | | 891.54 | 0.00 |
| Subtotal | | | | | | | | 29,491.61 | 29,491.61 |
| (Total of this page) | | | | | | | | 29,491.61 | 0.00 |

Sheet **48** of **91** continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

In re Long Beach Medical CenterCase No. 14-70593

Debtor

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS (Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

| CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.) | C O D E B O R R | H W J C | Husband, Wife, Joint, or Community | D A T E C L A I M W A S I N C U R R E D A N D C O N S I D E R A T I O N F O R C L A I M | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM | AMOUNT NOT ENTITLED TO PRIORITY, IF ANY |
|---|--------------------------------------|------------------|------------------------------------|--|--|--|--------------------------------------|--------------------|---|
| | | | | | | | | | AMOUNT ENTITLED TO PRIORITY |
| Account No. | | | | 2/18/2014 | | | | | |
| Maravi, Erasmo | | - | | | | | | 561.04 | |
| | | | | | | | | 561.04 | 0.00 |
| Account No. | | | | 2/18/2014 | | | | | |
| Maravilla, Mitchel | | - | | | | | | 4,615.18 | |
| | | | | | | | | 4,615.18 | 0.00 |
| Account No. | | | | 2/18/2014 | | | | | |
| MARKEY, KATHLEEN | | - | | | | | | 6,743.80 | |
| | | | | | | | | 6,743.80 | 0.00 |
| Account No. | | | | 2/18/2014 | | | | | |
| Martin, Ursula | | - | | | | | | 817.02 | |
| | | | | | | | | 817.02 | 0.00 |
| Account No. | | | | 2/18/2014 | | | | | |
| Martinez, Joselin | | - | | | | | | 97.69 | |
| | | | | | | | | 97.69 | 0.00 |
| Subtotal | | | | | | | | 12,834.73 | 0.00 |
| (Total of this page) | | | | | | | | 12,834.73 | 0.00 |

Sheet 49 of 91 continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

Case No. 14-70593

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS
(Continuation Sheet)

TYPE OF PRIORITY

Sheet 50 of 91 continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

B6E (Official Form 6E) (4/13) - Cont.

In re **Long Beach Medical Center**Case No. **14-70593**

Debtor

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS (Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

| CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.) | C O D E B T O R | H U S B A N D, W I F E, J O I N T, O R C O M M U N I T Y | D A T E C L A I M W A S I N C U R R E D A N D C O N S I D E R A T I O N F O R C L A I M | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | A M O U N T O F C L A I M | A M O U N T N O T E N T I T L E D T O P R I O R I T Y, I F A N Y | A M O U N T E N T I T L E D T O P R I O R I T Y |
|---|--------------------------------------|--|--|--|--|--------------------------------------|---|---|--|
| | | | | | | | | | |
| Account No. | | | 2/18/2014 | | | | | | |
| McGowan, Gail | | | | | | | | 1,502.06 | |
| | | | | | | | 1,502.06 | | 0.00 |
| Account No. | | | 2/18/2014 | | | | | | |
| McGuire, Barbara | | | | | | | | 2,340.08 | |
| | | | | | | | 2,340.08 | | 0.00 |
| Account No. | | | 2/18/2014 | | | | | | |
| McKenzie, Ella | | | | | | | | 0.00 | |
| | | | | | | | 0.00 | | 0.00 |
| Account No. | | | 2/18/2014 | | | | | | |
| McKeon, Mariellen | | | | | | | | 0.00 | |
| | | | | | | | 0.00 | | 0.00 |
| Account No. | | | 2/18/2014 | | | | | | |
| McMahon, Elizabeth | | | | | | | | 966.95 | |
| | | | | | | | 966.95 | | 0.00 |
| Subtotal | | | | | | | | 4,809.09 | |
| (Total of this page) | | | | | | | 4,809.09 | | 0.00 |

Sheet **51** of **91** continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

B6E (Official Form 6E) (4/13) - Cont.

In re **Long Beach Medical Center**Case No. **14-70593**

Debtor

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS (Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

| CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.) | C O D E B O R R | H W J C | Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM | AMOUNT NOT ENTITLED TO PRIORITY, IF ANY |
|---|--------------------------------------|------------------|--|--|--|--------------------------------------|--------------------|---|
| | | | | | | | | AMOUNT ENTITLED TO PRIORITY |
| Account No. | | | 2/18/2014 | | | | | |
| McManus, Maureen | | - | | | | | 312.24 | |
| | | | | | | | 312.24 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Mejia, Angela | | - | | | | | 761.96 | |
| | | | | | | | 761.96 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Melzer, Douglas | | - | | | | | 477,599.00 | |
| | | | | | | | 477,599.00 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| MINNIEER, JANINE | | - | | | | | 3,597.82 | |
| | | | | | | | 4,990.12 | 1,392.30 |
| Account No. | | | 2/18/2014 | | | | | |
| Mintz, Lisa | | - | | | | | 802.35 | |
| | | | | | | | 802.35 | 0.00 |
| Subtotal | | | | | | | 483,073.37 | |
| (Total of this page) | | | | | | | 484,465.67 | 1,392.30 |

Sheet **52** of **91** continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

B6E (Official Form 6E) (4/13) - Cont.

In re Long Beach Medical CenterCase No. 14-70593

Debtor

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS (Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

| CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.) | C O D E B O R R | H U S B A N D, W I F E, J O I N T, O R C O M M U N I T Y | D A T E C L A I M W A S I N C U R R E D A N D C O N S I D E R A T I O N F O R C L A I M | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | A M O U N T O F C L A I M | AMOUNT NOT ENTITLED TO PRIORITY, IF ANY |
|---|--------------------------------------|--|--|--|--|--------------------------------------|---|--|
| | | | | | | | | A M O U N T E N T I T L E D T O P R I O R I T Y |
| Account No. | | | 2/18/2014 | | | | | |
| MIRAYES, GAIL | | | | | | | | 6,067.13 |
| | | | | | | | 9,172.13 | 3,105.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Molina, Evangeline | | | | | | | | 8,701.04 |
| | | | | | | | 8,701.04 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Molof, George | | | | | | | | 390.60 |
| | | | | | | | 390.60 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Mondesir, Marie | | | | | | | | 102.90 |
| | | | | | | | 102.90 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Montano, Francisco | | | | | | | | 832.92 |
| | | | | | | | 832.92 | 0.00 |
| Subtotal | | | | | | | | 16,094.59 |
| (Total of this page) | | | | | | | 19,199.59 | 3,105.00 |

Sheet 53 of 91 continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

B6E (Official Form 6E) (4/13) - Cont.

In re Long Beach Medical CenterCase No. 14-70593

Debtor

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS (Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

| CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.) | C O D E D E B T O R | H W J C | Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM | AMOUNT NOT ENTITLED TO PRIORITY, IF ANY |
|---|--|------------------|--|--|--|--------------------------------------|--------------------|---|
| | | | | | | | | AMOUNT ENTITLED TO PRIORITY |
| Account No. | | | 2/18/2014 | | | | | |
| Montellano, Maria | | - | | | | | 5,297.24 | |
| | | | | | | | 5,297.24 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| MOORE, BARBARA | | - | | | | | 2,167.65 | |
| | | | | | | | 2,167.65 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Moore, Karen A | | - | | | | | 1,730.00 | |
| | | | | | | | 1,730.00 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Morales, Emma | | - | | | | | 97.72 | |
| | | | | | | | 97.72 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Morgan, Sandra | | - | | | | | 820.84 | |
| | | | | | | | 820.84 | 0.00 |
| Subtotal | | | | | | | 10,113.45 | |
| (Total of this page) | | | | | | | 10,113.45 | 0.00 |

Sheet **54** of **91** continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

B6E (Official Form 6E) (4/13) - Cont.

In re Long Beach Medical CenterCase No. 14-70593

Debtor

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS (Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

| CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.) | C O D E B O R R O W E R | H U S B A N D , W I F E , J O I N T , O R C O M M U N I T Y | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM | C O N T I N G E N T | U N L I Q U I T E D | D I S P U T E D | AMOUNT OF CLAIM | AMOUNT NOT ENTITLED TO PRIORITY, IF ANY |
|---|--|--|--|--|--|--------------------------------------|--------------------|---|
| | | | | | | | | AMOUNT ENTITLED TO PRIORITY |
| Account No. | | | 2/18/2014 | | | | | |
| Moriarty, Sharon | | - | | | | | | 4,849.13 |
| | | | | | | | 4,849.13 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Morovich, Kathleen | | - | | | | | | 740.18 |
| | | | | | | | 740.18 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Mullally, Peggy | | - | | | | | | 605.76 |
| | | | | | | | 1,195.52 | 589.76 |
| Account No. | | | 2/18/2014 | | | | | |
| Murphy, Margaret | | - | | | | | | 357.53 |
| | | | | | | | 357.53 | 0.00 |
| Account No. | | | 2/18/2014 | | | | | |
| Murphy, Timothy | | - | | | | | | 3,410.14 |
| | | | | | | | 5,726.20 | 2,316.06 |
| Subtotal | | | | | | | | 9,962.74 |
| (Total of this page) | | | | | | | 12,868.56 | 2,905.82 |

Sheet 55 of 91 continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims